

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
0042T	76380	NCCI Policy Manual 2021 Chapter IX C 8 + 12
0075T	36221 36222 36224 36225 36226	CCI code pairs similar codes 36200 36215
0095T	63076 69990 76000 77002 77003 95822 95860 95861 95867 95868 95870 95907 95908 95909 95910 95911 95912 95913 95920 95925 95926 95927 95928 95929 95930 95933 95937	Maintain CCI Logic CPT Text/Definition
0098T	63076 69990 76000 77002 77003 95822 95860 95861 95867 95868 95870 95907 95908 95909 95910 95911 95912 95913 95920 95925 95926 95927 95928 95929 95930 95933 95937	Maintain CCI Logic CPT Text/Definition
0312T	0213T 0216T 43500 43520 43647 43648 43830 43848 43882 44602 44603 44604 44605 44820 44850 44950 49000 49002 49010 49255 49570 63685 64595 95860 95861 95867 95868 95870 95920 95925 95926 95927 95928 95929 95930 95933 95937 95935 95939 95970 95981 95982	CCI code pairs similar codes 43881 64590
0313T	0213T 0216T 43500 43520 43647 43648 43830 43848 43882 44602 44603 44604 44605 44820 44850 44950 49000 49002 49010 49255 49570 63685 64595 95860 95861 95867 95868 95870 95920 95925 95926 95927 95928 95929 95930 95933 95937 95935 95939 95970 95981 95982	CCI code pairs similar codes 43881 64590
0314T	0213T 0216T 43500 43520 43647 43648 43830 43848 43882 44602 44603 44604 44605 44820 44850 44950 49000 49002 49010 49255 49570 63685 64595 95860 95861 95867 95868 95870 95920 95925 95926 95927 95928 95929 95930 95933 95937 95935 95939 95970 95981 95982	CCI code pairs similar codes 43881 64590
0315T	0213T 0216T 43500 43520 43647 43648 43830 43848 43882 44602 44603 44604 44605 44820 44850 44950 49000 49002 49010 49255 49570 63685 64595 95860 95861 95867 95868 95870 95920 95925 95926 95927 95928 95929 95930 95933 95937 95935 95939 95970 95981 95982	CCI code pairs similar codes 43881 64590
0316T	0213T 0216T 43500 43520 43647 43648 43830 43848 43882 44602 44603 44604 44605 44820 44850 44950 49000 49002 49010 49255 49570 63685 64595 95860 95861 95867 95868 95870 95920 95925 95926 95927 95928 95929 95930 95933 95937 95935 95939 95970 95981 95982	CCI code pairs similar codes 43881 64590
0317T	0106T 0107T 0108T 0109T 0110T	CCI code pairs similar code 95982

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
0375T	63076 77003 95920 0095T 0098T	Maintain CCI Logic CPT Text/Definition
00100	31646 82271 94664	NCCI Policy Manual 2021 Chapter II B
00102	31646 82271 94664	NCCI Policy Manual 2021 Chapter II B
00103	31646 82271 94664	NCCI Policy Manual 2021 Chapter II B
00104	31646 82271 94664	NCCI Policy Manual 2021 Chapter II B
00120	31646 82271 94664	NCCI Policy Manual 2021 Chapter II B
00124	00120 31646 82271 94664	NCCI Policy Manual 2021 Chapter II B
00126	00120 31646 82271 94664	NCCI Policy Manual 2021 Chapter II B
00140	31646 82271 94664	NCCI Policy Manual 2021 Chapter II B
00142	00140 31646 82271 94664	NCCI Policy Manual 2021 Chapter II B
00144	00140 31646 82271 94664	NCCI Policy Manual 2021 Chapter II B
00145	00140 31646 94664	NCCI Policy Manual 2021 Chapter II B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
00147	00140 31646 94664	NCCI Policy Manual 2021 Chapter II B
00148	00140 31646 94664	NCCI Policy Manual 2021 Chapter II B
00160	31646 94664	NCCI Policy Manual 2021 Chapter II B
00162	00160 31646 94664	NCCI Policy Manual 2021 Chapter II B
00164	00160 31646 94664	NCCI Policy Manual 2021 Chapter II B
00170	31646 94664	NCCI Policy Manual 2021 Chapter II B
00172	00170 31646 94664	NCCI Policy Manual 2021 Chapter II B
00174	00170 31646 94664	NCCI Policy Manual 2021 Chapter II B
00176	00170 31646 94664	NCCI Policy Manual 2021 Chapter II B
00190	31646 94664	NCCI Policy Manual 2021 Chapter II B
00192	00190 31646 94664	NCCI Policy Manual 2021 Chapter II B
00210	31646 94664	NCCI Policy Manual 2021 Chapter II B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
00211	00210 31646 94664	NCCI Policy Manual 2021 Chapter II B
00212	00210 31646 94664	NCCI Policy Manual 2021 Chapter II B
00214	00210 31646 94664	NCCI Policy Manual 2021 Chapter II B
00215	00210 31646 94664	NCCI Policy Manual 2021 Chapter II B
00216	00210 31646 94664	NCCI Policy Manual 2021 Chapter II B
00218	00210 31646 94664	NCCI Policy Manual 2021 Chapter II B
00220	00210 31646 94664	NCCI Policy Manual 2021 Chapter II B
00222	00210 31646 94664	NCCI Policy Manual 2021 Chapter II B
00300	31646 94664	NCCI Policy Manual 2021 Chapter II B
00320	31646 94664	NCCI Policy Manual 2021 Chapter II B
00322	00320 31646 94664	NCCI Policy Manual 2021 Chapter II B
00326	31646 36002 64561 67505 68200 94664 99100 99485	NCCI Policy Manual 2021 Chapter II B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
00350	31646 94664	NCCI Policy Manual 2021 Chapter II B
00352	00350 31646 94664	NCCI Policy Manual 2021 Chapter II B
00400	31646 94664	NCCI Policy Manual 2021 Chapter II B
00402	00400 31646 94664	NCCI Policy Manual 2021 Chapter II B
00404	00400 31646 94664	NCCI Policy Manual 2021 Chapter II B
00406	00400 31646 94664	NCCI Policy Manual 2021 Chapter II B
00410	00400 31646 94664	NCCI Policy Manual 2021 Chapter II B
00450	31646 94664	NCCI Policy Manual 2021 Chapter II B
00454	00450 31646 94664	NCCI Policy Manual 2021 Chapter II B
00470	31646 94664	NCCI Policy Manual 2021 Chapter II B
00472	00470 31646 94664	NCCI Policy Manual 2021 Chapter II B
00474	00470 31646 94664	NCCI Policy Manual 2021 Chapter II B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
00500	31646 94664	NCCI Policy Manual 2021 Chapter II B
00520	31500	NCCI Policy Manual 2021 Chapter II B
00522	00520 31646 94664	NCCI Policy Manual 2021 Chapter II B
00524	00520 31646 94664	NCCI Policy Manual 2021 Chapter II B
00528	00520 31646 94664	NCCI Policy Manual 2021 Chapter II B
00529	00520 31646 36002 64561 67505 68200 94664 99100	NCCI Policy Manual 2021 Chapter II B
00530	31646 94664	NCCI Policy Manual 2021 Chapter II B
00532	31646 94664	NCCI Policy Manual 2021 Chapter II B
00534	31646 94664	NCCI Policy Manual 2021 Chapter II B
00537	31646 94664	NCCI Policy Manual 2021 Chapter II B
00539	31646 36002 64561 67505 68200 94664 99100 99485	NCCI Policy Manual 2021 Chapter II B
00540	31646 94664	NCCI Policy Manual 2021 Chapter II B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
00541	00540 31646 36002 64561 67505 68200 94664 99100 99485	NCCI Policy Manual 2021 Chapter II B
00542	00540 31646 94664	NCCI Policy Manual 2021 Chapter II B
00546	00540 31646 94664	NCCI Policy Manual 2021 Chapter II B
00548	00540 31646 94664	NCCI Policy Manual 2021 Chapter II B
00550	31646 94664	NCCI Policy Manual 2021 Chapter II B
00560	31646 94664	NCCI Policy Manual 2021 Chapter II B
00561	31646 36002 64561 67505 68200 94664	NCCI Policy Manual 2021 Chapter II B
00562	31646 94664	NCCI Policy Manual 2021 Chapter II B
00563	31646 94664	NCCI Policy Manual 2021 Chapter II B
00566	31646 94664	NCCI Policy Manual 2021 Chapter II B
00567	31646 94664	NCCI Policy Manual 2021 Chapter II B
00580	31646 94664	NCCI Policy Manual 2021 Chapter II B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
00600	31646 94664	NCCI Policy Manual 2021 Chapter II B
00604	00600 31646 94664	NCCI Policy Manual 2021 Chapter II B
00620	31646 94664	NCCI Policy Manual 2021 Chapter II B
00630	31646 94664	NCCI Policy Manual 2021 Chapter II B
00632	00630 31646 94664	NCCI Policy Manual 2021 Chapter II B
00635	00630 31646 94664	NCCI Policy Manual 2021 Chapter II B
00640	31646 36002 64561 67505 68200 94664 99100 99485	NCCI Policy Manual 2021 Chapter II B
00670	31646 94664	NCCI Policy Manual 2021 Chapter II B
00700	31646 94664	NCCI Policy Manual 2021 Chapter II B
00702	00700 31646 94664	NCCI Policy Manual 2021 Chapter II B
00730	31646 94664	NCCI Policy Manual 2021 Chapter II B
00731	31646 94664	NCCI Policy Manual 2021 Chapter II B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
00732	31646 94664	NCCI Policy Manual 2021 Chapter II B
00750	31646 94664	NCCI Policy Manual 2021 Chapter II B
00752	00750 31646 94664	NCCI Policy Manual 2021 Chapter II B
00754	00750 31646 94664	NCCI Policy Manual 2021 Chapter II B
00756	00750 31646 94664	NCCI Policy Manual 2021 Chapter II B
00770	31646 94664	NCCI Policy Manual 2021 Chapter II B
00790	31646 94664	NCCI Policy Manual 2021 Chapter II B
00792	00790 31646 94664	NCCI Policy Manual 2021 Chapter II B
00794	00790 316469 94664	NCCI Policy Manual 2021 Chapter II B
00796	00790 31646 94664	NCCI Policy Manual 2021 Chapter II B
00797	00790 31646 94664	NCCI Policy Manual 2021 Chapter II B
00800	31646 94664	NCCI Policy Manual 2021 Chapter II B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
00802	00800 31646 94664	NCCI Policy Manual 2021 Chapter II B
00811	31646 94664	NCCI Policy Manual 2021 Chapter II B
00812	31646 94664	NCCI Policy Manual 2021 Chapter II B
00813	31646 94664	NCCI Policy Manual 2021 Chapter II B
00820	31646 94664	NCCI Policy Manual 2021 Chapter II B
00830	31646 94664	NCCI Policy Manual 2021 Chapter II B
00832	00830 31646 94664	NCCI Policy Manual 2021 Chapter II B
00834	31646 36002 64561 67505 68200 94664 99485	NCCI Policy Manual 2021 Chapter II B
00836	31646 36002 64561 67505 68200 94664 99485	NCCI Policy Manual 2021 Chapter II B
00840	31500 31646 94664	NCCI Policy Manual 2021 Chapter II B
00842	00840 31646 94664	NCCI Policy Manual 2021 Chapter II B
00844	00840 31646 94664	NCCI Policy Manual 2021 Chapter II B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
00846	00840 31646 94664	NCCI Policy Manual 2021 Chapter II B
00848	00840 31646 94664	NCCI Policy Manual 2021 Chapter II B
00851	00840 31646 94664	NCCI Policy Manual 2021 Chapter II B
00860	31646 94664	NCCI Policy Manual 2021 Chapter II B
00862	00860 31646 94664	NCCI Policy Manual 2021 Chapter II B
00864	00860 31646 94664	NCCI Policy Manual 2021 Chapter II B
00865	00860 31646 94664	NCCI Policy Manual 2021 Chapter II B
00866	00860 31646 94664	NCCI Policy Manual 2021 Chapter II B
00868	00860 31646 94664	NCCI Policy Manual 2021 Chapter II B
00870	00860 31646 94664	NCCI Policy Manual 2021 Chapter II B
00872	31646 94664	NCCI Policy Manual 2021 Chapter II B
00873	00872 31646 94664	NCCI Policy Manual 2021 Chapter II B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
00880	31646 94664	NCCI Policy Manual 2021 Chapter II B
00882	00880 31646 94664	NCCI Policy Manual 2021 Chapter II B
00902	31646 94664	NCCI Policy Manual 2021 Chapter II B
00904	00902 31646 94664	NCCI Policy Manual 2021 Chapter II B
00906	00902 31646 94664	NCCI Policy Manual 2021 Chapter II B
00908	00902 31646 94664	NCCI Policy Manual 2021 Chapter II B
00910	31646 94664	NCCI Policy Manual 2021 Chapter II B
00912	00910 31646 94664	NCCI Policy Manual 2021 Chapter II B
00914	00910 31646 94664	NCCI Policy Manual 2021 Chapter II B
00916	00910 31646 94664	NCCI Policy Manual 2021 Chapter II B
00918	00910 31646 94664	NCCI Policy Manual 2021 Chapter II B
00920	31646 94664	NCCI Policy Manual 2021 Chapter II B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
00921	00920 31646 36002 64561 67505 68200 94664 99100 99485	NCCI Policy Manual 2021 Chapter II B
00922	00920 31646 94664	NCCI Policy Manual 2021 Chapter II B
00924	00920 31646 94664	NCCI Policy Manual 2021 Chapter II B
00926	00920 31646 94664	NCCI Policy Manual 2021 Chapter II B
00928	00920 31646 94664	NCCI Policy Manual 2021 Chapter II B
00930	00920 31646 94664	NCCI Policy Manual 2021 Chapter II B
00932	00920 31646 94664	NCCI Policy Manual 2021 Chapter II B
00934	00920 31646 94664	NCCI Policy Manual 2021 Chapter II B
00936	00920 31646 94664	NCCI Policy Manual 2021 Chapter II B
00938	00920 31646 94664	NCCI Policy Manual 2021 Chapter II B
00940	31646 94664	NCCI Policy Manual 2021 Chapter II B
00942	00940 31646 94664	NCCI Policy Manual 2021 Chapter II B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
00944	00940 31646 94664	NCCI Policy Manual 2021 Chapter II B
00948	00940 31646 94664	NCCI Policy Manual 2021 Chapter II B
00950	00940 31646 94664	NCCI Policy Manual 2021 Chapter II B
00952	00940 31646 94664	NCCI Policy Manual 2021 Chapter II B
01112	31646 94664	NCCI Policy Manual 2021 Chapter II B
01120	31646 94664	NCCI Policy Manual 2021 Chapter II B
01130	31646 94664	NCCI Policy Manual 2021 Chapter II B
01140	31646 94664	NCCI Policy Manual 2021 Chapter II B
01150	31646 94664	NCCI Policy Manual 2021 Chapter II B
01160	31646 94664	NCCI Policy Manual 2021 Chapter II B
01170	31646 94664	NCCI Policy Manual 2021 Chapter II B
01173	31646 36002 64561 67505 68200 94664 99100	NCCI Policy Manual 2021 Chapter II B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
01200	31646 94664	NCCI Policy Manual 2021 Chapter II B
01202	31646 94664	NCCI Policy Manual 2021 Chapter II B
01210	31646 94664	NCCI Policy Manual 2021 Chapter II B
01212	01210 31646 94644	NCCI Policy Manual 2021 Chapter II B
01214	01210 31646 94644	NCCI Policy Manual 2021 Chapter II B
01215	01210 31646 94644	NCCI Policy Manual 2021 Chapter II B
01220	31646 94664	NCCI Policy Manual 2021 Chapter II B
01230	31646 94664	NCCI Policy Manual 2021 Chapter II B
01232	01230 31646 94664	NCCI Policy Manual 2021 Chapter II B
01234	01230 31646 94664	NCCI Policy Manual 2021 Chapter II B
01250	31646 94664	NCCI Policy Manual 2021 Chapter II B
01260	31646 94664	NCCI Policy Manual 2021 Chapter II B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
01270	31646 94664	NCCI Policy Manual 2021 Chapter II B
01272	01270 31646 94664	NCCI Policy Manual 2021 Chapter II B
01274	01270 31646 94664	NCCI Policy Manual 2021 Chapter II B
01320	31646 94664	NCCI Policy Manual 2021 Chapter II B
01340	31646 94664	NCCI Policy Manual 2021 Chapter II B
01360	31646 94664	NCCI Policy Manual 2021 Chapter II B
01380	31646 94664	NCCI Policy Manual 2021 Chapter II B
01382	31646 94664	NCCI Policy Manual 2021 Chapter II B
01390	31646 94664	NCCI Policy Manual 2021 Chapter II B
01392	31646 94664	NCCI Policy Manual 2021 Chapter II B
01400	31646 94664	NCCI Policy Manual 2021 Chapter II B
01402	01400 31646 94664	NCCI Policy Manual 2021 Chapter II B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
01404	01400 31646 94664	NCCI Policy Manual 2021 Chapter II B
01420	31646 94664	NCCI Policy Manual 2021 Chapter II B
01430	31646 94664	NCCI Policy Manual 2021 Chapter II B
01432	01430 31646 94664	NCCI Policy Manual 2021 Chapter II B
01440	31646 94664	NCCI Policy Manual 2021 Chapter II B
01442	01440 31646 94664	NCCI Policy Manual 2021 Chapter II B
01444	01440 31646 94664	NCCI Policy Manual 2021 Chapter II B
01462	31646 94664	NCCI Policy Manual 2021 Chapter II B
01464	31646 94664	NCCI Policy Manual 2021 Chapter II B
01470	31646 94664	NCCI Policy Manual 2021 Chapter II B
01472	01470 31646 94664	NCCI Policy Manual 2021 Chapter II B
01474	01470 31646 94664	NCCI Policy Manual 2021 Chapter II B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
01480	31646 94664	NCCI Policy Manual 2021 Chapter II B
01482	01480 31646 94664	NCCI Policy Manual 2021 Chapter II B
01484	01480 31646 94664	NCCI Policy Manual 2021 Chapter II B
01486	01480 31646 94664	NCCI Policy Manual 2021 Chapter II B
01490	31646 94664	NCCI Policy Manual 2021 Chapter II B
01500	31646 94664	NCCI Policy Manual 2021 Chapter II B
01502	01500 31646 94664	NCCI Policy Manual 2021 Chapter II B
01520	31646 94664	NCCI Policy Manual 2021 Chapter II B
01522	01520 31646 94664	NCCI Policy Manual 2021 Chapter II B
01610	31646 94664	NCCI Policy Manual 2021 Chapter II B
01620	31646 94664	NCCI Policy Manual 2021 Chapter II B
01622	31646 94664	NCCI Policy Manual 2021 Chapter II B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
01630	31646 94664	NCCI Policy Manual 2021 Chapter II B
01634	01630 31646 94664	NCCI Policy Manual 2021 Chapter II B
01636	01630 31646 94664	NCCI Policy Manual 2021 Chapter II B
01638	01630 31646 94664	NCCI Policy Manual 2021 Chapter II B
01650	31646 94664	NCCI Policy Manual 2021 Chapter II B
01652	01650 31646 94664	NCCI Policy Manual 2021 Chapter II B
01654	01650 31646 94664	NCCI Policy Manual 2021 Chapter II B
01656	01650 31646 94664	NCCI Policy Manual 2021 Chapter II B
01670	31646 94664	NCCI Policy Manual 2021 Chapter II B
01680	31646 94664	NCCI Policy Manual 2021 Chapter II B
01710	31646 94664	NCCI Policy Manual 2021 Chapter II B
01712	01710 31646 94664	NCCI Policy Manual 2021 Chapter II B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
01714	01710 31646 94664	NCCI Policy Manual 2021 Chapter II B
01716	01710 31646 94664	NCCI Policy Manual 2021 Chapter II B
01730	31646 94664	NCCI Policy Manual 2021 Chapter II B
01732	31646 94664	NCCI Policy Manual 2021 Chapter II B
01740	31646 94664	NCCI Policy Manual 2021 Chapter II B
01742	01740 31646 94664	NCCI Policy Manual 2021 Chapter II B
01744	01740 31646 94664	NCCI Policy Manual 2021 Chapter II B
01756	01740 31646 94664	NCCI Policy Manual 2021 Chapter II B
01758	01740 31646 94664	NCCI Policy Manual 2021 Chapter II B
01760	01740 31646 94664	NCCI Policy Manual 2021 Chapter II B
01770	31646 94664	NCCI Policy Manual 2021 Chapter II B
01772	01770 31646 94664	NCCI Policy Manual 2021 Chapter II B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
01780	31646 94664	NCCI Policy Manual 2021 Chapter II B
01782	01780 31646 94664	NCCI Policy Manual 2021 Chapter II B
01810	31646 94664	NCCI Policy Manual 2021 Chapter II B
01820	31646 94664	NCCI Policy Manual 2021 Chapter II B
01829	31646 36002 64561 67505 68200 94664 99100 99485	NCCI Policy Manual 2021 Chapter II B
01830	31646 94664	NCCI Policy Manual 2021 Chapter II B
01832	01829 01830 31646 94664	NCCI Policy Manual 2021 Chapter II B
01840	31646 94664	NCCI Policy Manual 2021 Chapter II B
01842	01840 31646 94664	NCCI Policy Manual 2021 Chapter II B
01844	31646 94664	NCCI Policy Manual 2021 Chapter II B
01850	31646 94664	NCCI Policy Manual 2021 Chapter II B
01852	01850 31646 94664	NCCI Policy Manual 2021 Chapter II B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
01860	31646 94664	NCCI Policy Manual 2021 Chapter II B
01916	31646 94664	NCCI Policy Manual 2021 Chapter II B
01920	31646 94664 99485	NCCI Policy Manual 2021 Chapter II B
01922	31646 94664 99485	NCCI Policy Manual 2021 Chapter II B
01924	31646 94664	NCCI Policy Manual 2021 Chapter II B
01925	01924 31646 94664	NCCI Policy Manual 2021 Chapter II B
01926	01924 31646 94664	NCCI Policy Manual 2021 Chapter II B
01930	31646 94664	NCCI Policy Manual 2021 Chapter II B
01931	01930 31646 94664	NCCI Policy Manual 2021 Chapter II B
01932	01930 31646 94664	NCCI Policy Manual 2021 Chapter II B
01933	01930 31646 94664	NCCI Policy Manual 2021 Chapter II B
01937	31646 82271 94664	NCCI Policy Manual 2021 Chapter II B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
01938	31646 82271 94664	NCCI Policy Manual 2021 Chapter II B
01939	31646 82271 94664	NCCI Policy Manual 2021 Chapter II B
01940	31646 82271 94664	NCCI Policy Manual 2021 Chapter II B
01941	31646 82271 94664	NCCI Policy Manual 2021 Chapter II B
01942	31646 82271 94664	NCCI Policy Manual 2021 Chapter II B
01951	31646 94664	NCCI Policy Manual 2021 Chapter II B
01952	01951 31646 94664	NCCI Policy Manual 2021 Chapter II B
01953	31646 64517 94664	NCCI Policy Manual 2021 Chapter II B
01958	31646 36002 64561 67505 68200 94664 99100	NCCI Policy Manual 2021 Chapter II B
01960	01968 01969 31646 64484 94664	NCCI Policy Manual 2021 Chapter II B
01961	01968 01969 31646 64484 94664	NCCI Policy Manual 2021 Chapter II B
01962	01969 31646 94664	NCCI Policy Manual 2021 Chapter II B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
01963	01962 01969 31646 94664	NCCI Policy Manual 2021 Chapter II B
01965	31646 94664	NCCI Policy Manual 2021 Chapter II B
01966	31646 94664	NCCI Policy Manual 2021 Chapter II B
01967	01960 31646 64484 94664	NCCI Policy Manual 2021 Chapter II B
01968	31646 94664	NCCI Policy Manual 2021 Chapter II B
01969	31646 94664	NCCI Policy Manual 2021 Chapter II B
01990	31646 94664 99485	NCCI Policy Manual 2021 Chapter II B
01991	31646 36002 64561 67505 68200 94664 99100 99485	NCCI Policy Manual 2021 Chapter II B
01992	31646 36002 64561 67505 68200 94664 99100 99485	NCCI Policy Manual 2021 Chapter II B
01996	31646 64517 94664 99485	NCCI Policy Manual 2021 Chapter II B
10040	17340 17360	CPT Text/Definition
11000	10140	NCCI Policy Manual 2021 Chapter III D
11004	10120 10121 10140 10160 10180 11001 11462 11463 11470 11471 15003 15005 15852 16000 16020 16025 16030 16035 17250 20200 20205 20206	NCCI Policy Manual 2021 Chapter III D + E

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
11005	10120 10121 10140 10160 10180 11462 11463 11470 11471 15003 15005 15852 16000 16020 16025 16030 16035 17250 20200 20205 20206	NCCI Policy Manual 2021 Chapter III D + E
11006	10120 10121 10140 10160 10180 11462 11463 11470 11471 15003 15005 15852 16000 16020 16025 16030 16035 17250 20200 20205 20206	NCCI Policy Manual 2021 Chapter III D + E
11010	10140 17250 22857	NCCI Policy Manual 2021 Chapter III D + E
11011	10140 17250 22857	NCCI Policy Manual 2021 Chapter III D + E
11012	10140 17250 22857	NCCI Policy Manual 2021 Chapter III D + E
11042	10140	NCCI Policy Manual 2021 Chapter III D
11043	10140	NCCI Policy Manual 2021 Chapter III D
11044	10140	NCCI Policy Manual 2021 Chapter III D
11102	10030 10140	NCCI Policy Manual 2021 Chapter III D
11104	10030 10140	NCCI Policy Manual 2021 Chapter III D
11105	10030 10140	NCCI Policy Manual 2021 Chapter III D
11300	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
11301	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11302	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11303	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11305	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11306	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11307	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11308	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11310	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11311	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11312	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11313	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11400	10140	NCCI Policy Manual 2021 Chapter III D

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
11401	10140	NCCI Policy Manual 2021 Chapter III D
11402	10140	NCCI Policy Manual 2021 Chapter III D
11403	10140	NCCI Policy Manual 2021 Chapter III D
11404	10140	NCCI Policy Manual 2021 Chapter III D
11406	10140	NCCI Policy Manual 2021 Chapter III D
11420	10140	NCCI Policy Manual 2021 Chapter III D
11421	10140	NCCI Policy Manual 2021 Chapter III D
11422	10140	NCCI Policy Manual 2021 Chapter III D
11423	10140	NCCI Policy Manual 2021 Chapter III D
11424	10140	NCCI Policy Manual 2021 Chapter III D
11426	10140	NCCI Policy Manual 2021 Chapter III D
11440	10140	NCCI Policy Manual 2021 Chapter III D

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
11441	10140	NCCI Policy Manual 2021 Chapter III D
11442	10140	NCCI Policy Manual 2021 Chapter III D
11443	10140	NCCI Policy Manual 2021 Chapter III D
11444	10140	NCCI Policy Manual 2021 Chapter III D
11446	10140	NCCI Policy Manual 2021 Chapter III D
11450	10140 64650	NCCI Policy Manual 2021 Chapter III C + D
11451	10140 11450 64650	NCCI Policy Manual 2021 Chapter III C + D
11462	10140 64653	NCCI Policy Manual 2021 Chapter III C + D
11463	10140 11462 64653	NCCI Policy Manual 2021 Chapter III C + D
11470	10140 64653	NCCI Policy Manual 2021 Chapter III C + D
11471	10140 64653	NCCI Policy Manual 2021 Chapter III C + D
11600	10140 12031 12032 12034 12035 12036 12037 12041 12042 12044 12045 12046 12047 12051 12052 12053 12054 12055 12056 12057 96405 96406	NCCI Policy Manual 2021 Chapter III D + E + G

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
11601	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11602	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11603	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11604	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11606	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11620	10140 12031 12032 12034 12035 12036 12037 12041 12042 12044 12045 12046 12047 12051 12052 12053 12054 12055 12056 12057 96405 96406	NCCI Policy Manual 2021 Chapter III D + E6 + G
11621	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11622	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11623	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11624	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11626	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11640	10140 12031 12032 12034 12035 12036 12037 12041 12042 12044 12045 12046 12047 12051 12052 12053 12054 12055 12056 12057 96405 96406	NCCI Policy Manual 2021 Chapter III D + E6 + G

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
11641	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11642	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11643	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11644	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11646	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
11719	11900 11901 96405 96406	NCCI Policy Manual 2021 Chapter III G
11720	11900 11901 96405 96406	NCCI Policy Manual 2021 Chapter III G
11721	11900 11901 96405 96406	NCCI Policy Manual 2021 Chapter III G
11762	17250	CPT Text/Definition
11920	15877 15878 15879	NCCI Policy Integral/Incident To
11970	11950 11951 11952 11954 15877 15878 15879 19328 19342 19342 19370	NCCI Policy Chapt I E + III J Integral/Incident To Plastic Surgery Society CPT Information Services
11971	11950 11951 11952 11954 15877 15878 15879	NCCI Policy Integral/Incident To

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
11981	G0168	NCCI Policy Manual 2021 Chapter III L5
11982	G0168	NCCI Policy Manual 2021 Chapter III L5
11983	G0168	NCCI Policy Manual 2021 Chapter III L5
12001	96405 96406	NCCI Policy Manual 2021 Chapter III G
12002	96405 96406	NCCI Policy Manual 2021 Chapter III G
12004	96405 96406	NCCI Policy Manual 2021 Chapter III G
12005	96405 96406	NCCI Policy Manual 2021 Chapter III G
12006	96405 96406	NCCI Policy Manual 2021 Chapter III G
12007	96405 96406	NCCI Policy Manual 2021 Chapter III G
12011	96405 96406	NCCI Policy Manual 2021 Chapter III G
12013	96405 96406	NCCI Policy Manual 2021 Chapter III G
12014	96405 96406	NCCI Policy Manual 2021 Chapter III G

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
12015	96405 96406	NCCI Policy Manual 2021 Chapter III G
12016	96405 96406	NCCI Policy Manual 2021 Chapter III G
12017	96405 96406	NCCI Policy Manual 2021 Chapter III G
12018	96405 96406	NCCI Policy Manual 2021 Chapter III G
12020	96405 96406	NCCI Policy Manual 2021 Chapter III G
12021	96405 96406	NCCI Policy Manual 2021 Chapter III G
12031	96405 96406	NCCI Policy Manual 2021 Chapter III G
12032	96405 96406	NCCI Policy Manual 2021 Chapter III G
12034	96405 96406	NCCI Policy Manual 2021 Chapter III G
12035	96405 96406	NCCI Policy Manual 2021 Chapter III G
12036	96405 96406	NCCI Policy Manual 2021 Chapter III G
12037	96405 96406	NCCI Policy Manual 2021 Chapter III G

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
12041	96405 96406	NCCI Policy Manual 2021 Chapter III G
12042	96405 96406	NCCI Policy Manual 2021 Chapter III G
12044	96405 96406	NCCI Policy Manual 2021 Chapter III G
12045	96405 96406	NCCI Policy Manual 2021 Chapter III G
12046	96405 96406	NCCI Policy Manual 2021 Chapter III G
12047	96405 96406	NCCI Policy Manual 2021 Chapter III G
12051	96405 96406	NCCI Policy Manual 2021 Chapter III G
12052	96405 96406	NCCI Policy Manual 2021 Chapter III G
12053	96405 96406	NCCI Policy Manual 2021 Chapter III G
12054	96405 96406	NCCI Policy Manual 2021 Chapter III G
12055	96405 96406	NCCI Policy Manual 2021 Chapter III G
12056	96405 96406	NCCI Policy Manual 2021 Chapter III G

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
12057	96405 96406	NCCI Policy Manual 2021 Chapter III G
13100	96405 96406	NCCI Policy Manual 2021 Chapter III G
13101	96405 96406	NCCI Policy Manual 2021 Chapter III G
13120	96405 96406	NCCI Policy Manual 2021 Chapter III G
13121	96405 96406	NCCI Policy Manual 2021 Chapter III G
13131	96405 96406	NCCI Policy Manual 2021 Chapter III G
13132	96405 96406	NCCI Policy Manual 2021 Chapter III G
13151	96405 96406	NCCI Policy Manual 2021 Chapter III G
13152	96405 96406	NCCI Policy Manual 2021 Chapter III G
13160	10140 96405 96406	NCCI Policy Manual 2021 Chapter III D + G
14000	11010 13160	NCCI Policy Manual 2021 Chapter III E
14001	11010 13160	NCCI Policy Manual 2021 Chapter III E

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
14020	11010 13160	NCCI Policy Manual 2021 Chapter III E
14021	11010 13160	NCCI Policy Manual 2021 Chapter III E
14040	11010 13160	NCCI Policy Manual 2021 Chapter III D + E
14041	11010 13160	NCCI Policy Manual 2021 Chapter III E
14060	11010 13160	NCCI Policy Manual 2021 Chapter III E
14061	11010 13160	NCCI Policy Manual 2021 Chapter III E
14301	11010 13160	NCCI Policy Manual 2021 Chapter III E
14302	11010 13102 13122 13133 13153 13160	NCCI Policy Manual 2021 Chapter III E
15040	11008 11010 11011 11012 11102 11104 11106 13160 15050 15271 15273 15852 16020 16025 16030 29000 29010 29015 29035 29040 29044 29046 29049 29055 29058 29065 29075 29085 29105 29125 29126 29130 29131 29200 29240 29260 29280 29305 29325 29345 29355 29358 29365 29405 29425 29435 29440 29445 29450 29505 29515 29520 29530 29540 29550 29580 G0168	NCCI Policy Manual Chapter I C Chapter III J
15050	11010 11011 11012 15275 15277	NCCI Policy Manual Chapter III G+H
15100	11008 11010 11011 11012	NCCI Policy Manual Chapter III G+H

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
15110	11008 11010 11011 11012 11102 11104 11106 13160 15040 15050	NCCI Policy Manual Chapter III G+H
15115	11008 11010 11011 11012 11102 11104 11106 13160 15050 20526 20550 20551 20552 20553 25259 26340	NCCI Policy Manual Chapter III G+H
15120	11010 11011 11012	NCCI Policy Manual Chapter III G+H
15130	11008 11010 11011 11012 11102 11104 11106 13160 15040 15050 15220 15271 15273 20550 20551 20552 20553	NCCI Policy Manual Chapter III G+H
15135	11008 11010 11011 11012 11102 11104 11106 13160 15050 20526 20550 20551 20552 20553 25259 26340	NCCI Policy Manual Chapter I C Chapter III J
15150	11008 11010 11011 11012 11102 11104 11106 13160 15040 15050 15100 15200 15220 15271 15273	NCCI Policy Manual Chapter I C Chapter III J
15155	11008 11010 11011 11012 11102 11104 11106 13160 15050 20526 20550 20551 20552 20553 25259 26340	NCCI Policy Manual 2021 Chapter III G + H
15200	11008 15100 15120	NCCI Policy Manual 2021 Chapter III G + H
15220	11010 11011 11012 15100 15120 15200	NCCI Policy Manual 2021 Chapter III G + H
15240	11010 11011 11012 15100 15120 15200 15220	NCCI Policy Manual 2021 Chapter III G + H
15260	11010 11011 11012 15100 15120 15200 15220 15240	NCCI Policy Manual 2021 Chapter III G + H
15271	11008 11010 11011 11012 11043 11044 11102 11104 11106 13160 15100 15110 15200	NCCI Policy Manual 2021 Chapter I C Chapter III J

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
15273	11008 11010 11011 11012 11102 11104 11106 13160 15100 15110 15200	NCCI Policy Manual 2021 Chapter I C Chapter III J
15275	11008 11010 11011 11012 11102 11104 11106 13160 15115 15120 15135 15155 15220 15240 15260	NCCI Policy Manual 2021 Chapter I C Chapter III J
15277	11008 11010 11011 11012 11102 11104 11106 13100 13101 13102 13122 13133 13153 13160 15115 15120 15135 15155 15220 15240 15260	NCCI Policy Manual 2021 Chapter I C Chapter III J
15570	11400 11401 11402 11403 11404 11406 11420 11421 11422 11423 11424 11426 11440 11441 11442 11443 11444 11446 11600 11601 11602 11603 11604 11606 11620 11621 11622 11623 11624 11626 11640 11641 11642 11643 11644 11646	Maintain CCI Logic NCCI Policy Chap III E+G+H
15572	11400 11401 11402 11403 11404 11406 11420 11421 11422 11423 11424 11426 11440 11441 11442 11443 11444 11446 11600 11601 11602 11603 11604 11606 11620 11621 11622 11623 11624 11626 11640 11641 11642 11643 11644 11646	Maintain CCI Logic NCCI Policy Chap III E+G+H
15574	11400 11401 11402 11403 11404 11406 11420 11421 11422 11423 11424 11426 11440 11441 11442 11443 11444 11446 11470 11471 11600 11601 11602 11603 11604 11606 11620 11621 11622 11623 11624 11626 11640 11641 11642 11643 11644 11646	Maintain CCI Logic NCCI Policy Chap III E+G+H
15576	11400 11401 11402 11403 11404 11406 11420 11421 11422 11423 11424 11426 11440 11441 11442 11443 11444 11446 11470 11471 11600 11601 11602 11603 11604 11606 11620 11621 11622 11623 11624 11626 11640 11641 11642 11643 11644 11646	Maintain CCI Logic NCCI Policy Chap III E+G+H
15756	15130 15135 15271 15273 15275 15277	NCCI Policy Manual 2021 Chapter III I
15757	15130 15135 15271 15273 15275 15277	NCCI Policy Manual 2021 Chapter III I
15776	15775	NCCI Policy Manual 2021 Chapter I H

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
15821	67916 67917 67923 67924	NCCI Policy Manual 2021 Chapter VIII
15822	67840	NCCI Policy Manual 2021 Chapter I B
15823	67840 67916 67917 67923 67924	NCCI Policy Manual 2021 Chapter I B Chapter VIII
15830	15877	NCCI Policy Manual 2021 Chapter I C Chapter III J
15832	15879	NCCI Policy Manual 2021 Chapter I C Chapter III J
15833	15879	NCCI Policy Manual 2021 Chapter I C Chapter III J
15834	15877 15879	NCCI Policy Manual 2021 Chapter I C Chapter III J
15835	15877	NCCI Policy Manual 2021 Chapter I C Chapter III J
15836	15878	Maintain CCI Logic NCCI Policy Chapter I C8 NCCI Policy Chapter III J
15837	15878	NCCI Policy Manual 2021 Chapter I C Chapter III J
15838	15876	NCCI Policy Manual 2021 Chapter I C Chapter III J
15839	15876 15877 15878 15879	NCCI Policy Manual 2021 Chapter I C Chapter III J

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
15851	S0630	NCCI Policy Manual 2021 Chapter I C
17000	17250	CPT Text/Definition
17004	17250	CPT Text/Definition
17106	17250	CPT Text/Definition
17107	17250	CPT Text/Definition
17108	17250	CPT Text/Definition
17110	17250	CPT Text/Definition
17111	17250	CPT Text/Definition
19100	10030	NCCI Policy Manual 2021 Chapter III D
19101	10030	NCCI Policy Manual 2021 Chapter III D
19110	10030	NCCI Policy Manual 2021 Chapter III D
19112	10030	NCCI Policy Manual 2021 Chapter III D
19120	10030 19101	NCCI Policy Manual 2021 Chapter III D
19281	10030	NCCI Policy Manual 2021 Chapter III D
19283	10030	NCCI Policy Manual 2021 Chapter III D

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
19285	10030	NCCI Policy Manual 2021 Chapter III D
19287	10030	NCCI Policy Manual 2021 Chapter III D
19296	11920 11921 11922 16000 16020 16025 16030 77011 77014 77761 77762 77763	CMS Claim Process Manual Chapter 13 Section 70.2
19298	11920 11921 11922 16000 16020 16025 16030 77011 77014 77761 77762 77763	CMS Claim Process Manual Chapter 13 Section 70.2
19300	10030 19020	NCCI Policy Manual 2021 Chapter III D
19301	10030 14000 14001 14301 14302 19020 19101	NCCI Policy Manual 2021 Chapter III D + E + G
19302	10030 14000 14001 14301 14302 19020 19101	NCCI Policy Manual 2021 Chapter III D + E + G
19303	10030 14000 14001 14301 14302 19020 19101	NCCI Policy Manual 2021 Chapter III D + E + G
19304	10030 14000 14001 14301 14302 19020 19101	NCCI Policy Manual 2021 Chapter III D + E + G
19305	10030 14000 14001 14301 14302 19020 19101	NCCI Policy Manual 2021 Chapter III D + E + G
19306	10030 14000 14001 14301 14302 19020 19101	NCCI Policy Manual 2021 Chapter III D + E + G
19307	10030 14000 14001 14301 14302 19020 19101	NCCI Policy Manual 2021 Chapter III D + E + G

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
19316	11950 11951 11952 11954 14000 14001 14301 14302 15271 15273 15877 15878 15879	NCCI Policy Integral/Incident To
19318	11950 11951 11952 11954 14000 14001 14301 14302 15271 15273 15830 15836 15839 15876 15877 15878 15879	NCCI Policy Manual 2021 Chapter I Integral/Incident To
19325	11950 11951 11952 11954 15271 15273 15877 15878 15879	NCCI Policy Integral/Incident To
19328	11950 11951 11952 11954 15271 15273 15877 15878 15879	NCCI Policy Integral/Incident To
19330	11950 11951 11952 11954 15271 15273 15877 15878 15879 19328	NCCI Policy Chapter I B Integral/Incident To CPT Assistant August 1996
19340	11950 11951 11952 11954 15271 15273 15877 15878 15879 19328	NCCI Policy Chapter I B Integral/Incident To CPT Assistant August 1996
19342	11950 11951 11952 11954 15271 15273 15877 15878 15879 19328	NCCI Policy Chapter I B Integral/Incident To CPT Assistant August 1996
19350	11950 11951 11952 11954 15271 15273 15877 15878 15879 19328	NCCI Policy Integral/Incident To
19355	11950 11951 11952 11954 15271 15273 15877 15878 15879 19328	NCCI Policy Integral/Incident To
19357	11950 11951 11952 11954 15271 15273 15877 15878 15879 19318 19328 19340	NCCI Policy Chapter I B Integral/Incident To CPT Assistant August 1996

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
19361	11950 11951 11952 11954 15271 15273 15877 15878 15879 19328	NCCI Policy Integral/Incident To
19364	11950 11951 11952 11954 14301 15271 15273 15877 15878 15879 19328 20926 35761	NCCI Policy Integral/Incident To
19367	11950 11951 11952 11954 15271 15273 15877 15878 15879 19328	NCCI Policy Integral/Incident To
19368	11950 11951 11952 11954 15271 15273 15877 15878 15879 19328	NCCI Policy Integral/Incident To
19369	11950 11951 11952 11954 15271 15273 15877 15878 15879 19328	NCCI Policy Integral/Incident To
19370	11950 11951 11952 11954 15271 15273 15877 15878 15879 19328 19330	NCCI Policy Integral/Incident To
19371	11950 11951 11952 11954 15271 15273 15877 15878 15879 19328 19330	NCCI Policy Manual 2021 Chapter I B Integral/Incident To CPT Assistant August 1996
19380	11950 11951 11952 11954 13101 13102 15271 15273 15877 15878 15879 19370	NCCI Policy Manual 2021 Chapter I B Integral/Incident To
19396	15271 15273 15877 15878 15879	NCCI Policy Integral/Incident To
20200	10030	NCCI Policy Manual 2021 Chapter 1 C7
20205	10030	NCCI Policy Manual 2021 Chapter 1 C7

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
20206	10030	NCCI Policy Manual 2021 Chapter 1 C7
20500	20501	NCCI Policy Manual 2021 Chapter I J + K
20526	10060 10061 10140 11010 12011 15852 29065 29085 29126 29240 29280 95907 95908 95909 95910 95911 95912 95913	Maintain CCI Logic NCCI Policy Manual Chapter XI - L5
20551	12032 12042 95907 95908 95909 95910 95911 95912 95913	Maintain CCI Logic NCCI Policy Manual Chapter XI - L5
20552	12032 12042 95907 95908 95909 95910 95911 95912 95913	Maintain CCI Logic NCCI Policy Manual Chapter XI - L5
20553	12032 12042 95907 95908 95909 95910 95911 95912 95913	Maintain CCI Logic NCCI Policy Manual Chapter XI - L5
20612	11010 11900 11901 29075 29105 29125 29130 29260 29405 29425 29450 29515 29530 29540 29550 29580 64704 72240 72265 72295 87076 87077 87102 95907 95908 95909 95910 95911 95912 95913	Maintain CCI Logic NCCI Policy Manual Chapter XI - L5
20664	20661	NCCI Policy Manual 2021 Chapter I L
20805	20551 20552 20553	NCCI Policy Manual 2021 Chapter I L
20955	20900 20902	NCCI Policy Manual 2021 Chapter IV I

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
20956	0312T 0313T 0314T 0315T 0316T	CCI code pairs similar code 64590
20957	20902	NCCI Policy Manual 2021 Chapter I C 10 + 11
20962	20900 20902	NCCI Policy Manual 2021 Chapter IV I
21025	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
21026	20982	NCCI Policy Manual 2021 Chapter I C 10 + 12
21029	20982	NCCI Policy Manual 2021 Chapter I C 10 + 13
21030	20982	NCCI Policy Manual 2021 Chapter I C 10 + 14
21031	20982	NCCI Policy Manual 2021 Chapter I C 10 + 15
21032	20982	NCCI Policy Manual 2021 Chapter I C 10 + 16
21034	20982	NCCI Policy Manual 2021 Chapter I C 10 + 17
21040	20982	NCCI Policy Manual 2021 Chapter I C 10 + 18
21044	20982	NCCI Policy Manual 2021 Chapter I C 10 + 19

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
21045	20982 21046 21047	NCCI Policy Manual v 18.3 Chapter I C 9 / 10 + K
21046	20982 21025 21044 41800 41850	NCCI Policy Manual 2021 Chapter I C 9 / G + L
21047	20982 21044 41800 41805	NCCI Policy Manual 2021 Chapter I C 9 / G + L
21048	20615 20982 21026 21029 21034	NCCI Policy Manual 2021 Chapter I C 9 / G + L
21049	20615 20982 21029 21034	NCCI Policy Manual 2021 Chapter I C 9 / G + L
21050	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
21060	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
21070	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
21079	D5954 D5955 D5958 D5959	CPT/HCPCS Text/Definition
21125	21046 21047	Maintain CCI Logic
21127	21046 21047	Maintain CCI Logic
21138	21137	NCCI Policy Manual 2021 Chapter I K + L
21193	21046 21047 21048 21049	Maintain CCI Logic
21194	21046 21047 21048 21049	Maintain CCI Logic

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
21235	69635	NCCI Policy Integral/Incident To
21244	21046 21047 21048 21049	Maintain CCI Logic
21245	21046 21047 21048 21049	Maintain CCI Logic
21246	21046 21047 21048 21049	Maintain CCI Logic
21247	21046 21048 21049	Maintain CCI Logic
21248	21046 21047 21048 21049	NCCI Policy Manual 2021 Chapter I G + L + M
21249	21046 21047 21048 21049	NCCI Policy Manual 2021 Chapter I G + L + M
21320	21325	NCCI Policy Manual 2021 Chapter I L
21330	21325	NCCI Policy Manual 2021 Chapter I L
21339	21338	NCCI Policy Manual 2021 Chapter I L
21390	21386	NCCI Policy Manual 2021 Chapter I L
21395	21386	NCCI Policy Manual 2021 Chapter I L
21436	21432 21433 21435	NCCI Policy Manual 2021 Chapter I H + L
21502	21600	NCCI Policy Manual 2021 Chapter I M

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
21811	21820 21825	NCCI Policy Manual 2021 Chapter I C 9 + 10 + H
21812	21820 21825	NCCI Policy Manual 2021 Chapter I C 9 + 10 + H
21813	21820 21825	NCCI Policy Manual 2021 Chapter I C 9 + 10 + H
22010	11000 11001 11004 11005 11006 11008 11010 11011 11012 11042 11043 11044 11102 11104 11106 20102 35840 49424 95957 95958	Maintain CCI Logic CPT Text/Definition
22015	11000 11001 11004 11005 11006 11008 11010 11011 11012 11042 11043 11044 11102 11104 11106 20102 35840 49424 95957 95958	Maintain CCI Logic CPT Text/Definition
22100	22830	NCCI Policy Manual 2021 Chapter IV I 10
22101	22830	NCCI Policy Manual 2021 Chapter IV I 10
22102	22830	NCCI Policy Manual 2021 Chapter IV I 10
22110	22830	NCCI Policy Manual 2021 Chapter IV I 10
22112	22830	NCCI Policy Manual 2021 Chapter IV I 10
22114	22830	NCCI Policy Manual 2021 Chapter IV I 10
22210	22830	NCCI Policy Manual 2021 Chapter IV I 10

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
22212	22830	NCCI Policy Manual 2021 Chapter IV I 10
22214	22830 22857	NCCI Policy Manual 2021 Chapter I E Chapter IV H9 + H23
22220	22830	NCCI Policy Manual 2021 Chapter IV I 10
22222	22830	NCCI Policy Manual 2021 Chapter IV I 10
22224	22830	NCCI Policy Manual 2021 Chapter IV I 10
22318	22830	NCCI Policy Manual 2021 Chapter IV I 10
22319	22830	NCCI Policy Manual 2021 Chapter IV I 10
22325	22830	NCCI Policy Manual 2021 Chapter IV I 10
22326	22830	NCCI Policy Manual 2021 Chapter IV I 10
22327	22830	NCCI Policy Manual 2021 Chapter IV I 10
22328	22830	NCCI Policy Manual 2021 Chapter IV I 10
22505	38220	NCCI Policy Manual 2021 Chapter IV F 7

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
22510	22830 38220	NCCI Policy Manual 2021 Chapter IV F 7 + I 10
22511	22830 38220	NCCI Policy Manual 2021 Chapter IV F 7 + I 10
22512	22830 38220	NCCI Policy Manual 2021 Chapter IV F 7 + I 10
22513	22511 22830 38220 36005	NCCI Policy Manual 2021 Chapter I E Chapt IV F7
22514	20251 22510 38220 36005	NCCI Policy Manual 2021 Chapter I E Chapt IV F
22515	38220	NCCI Policy Manual 2021 Chapter IV F 7
22526	38220	NCCI Policy Manual 2021 Chapter IV F 7
22527	38220	NCCI Policy Manual 2021 Chapter IV F 7
22532	20680 22556 22610	NCCI Policy Manual 2021 Chapter I L + M Chapter V D 15
22533	20680 22558 22586 22612 22630	NCCI Policy Manual 2021 Chapter I L + M Chapter V D
22551	22505 29000 29015 29040 63001 63015 63020 63040 63045 63050 77002	Maintain CCI Logic Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
22586	95920	NCCI Policy Manual 2021 Chapter XI - L5
22612	22214 22325	NCCI Policy Integral/Incident To
22630	22214 22325	NCCI Policy Integral/Incident To
22632	63048	NCCI Policy Integral/Incident To
22633	22214 22325	NCCI Policy Integral/Incident To
22818	22830	NCCI Policy Manual 2021 Chapter IV I 10
22819	22830	NCCI Policy Manual 2021 Chapter IV I 10
22830	38220	NCCI Policy Manual 2021 Chapter IV F 7
22840	20680 22830	NCCI Policy Manual 2021 Chapter IV G 10+ 11 I 10
22841	20680 63295	NCCI Policy Manual 2021 Chapter I E Chapter IV H Chapter V D
22842	20680 22830	NCCI Policy Manual 2021 Chapter IV G 10+ 11 I 10

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
22843	20680 22830	NCCI Policy Manual 2021 Chapter IV G 10+ 11 I 10
22844	20680 22830	NCCI Policy Manual 2021 Chapter IV G 10+ 11 I 10
22845	20680 22830	NCCI Policy Manual 2021 Chapter IV G 10+ 11 I 10
22846	20680 22830	NCCI Policy Manual 2021 Chapter IV G 10+ 11 I 10
22847	20680 22830	NCCI Policy Manual 2021 Chapter IV G 10+ 11 I 10
22848	20680 22830	NCCI Policy Manual 2021 Chapter IV G 10+ 11 I 10
22849	20680 22830	NCCI Policy Manual 2021 Chapter IV G 10+ 11 I 10
22853	20680 22830 22850 22855	NCCI Policy Manual 2021 Chapter I E Chapter IV F + H Chapter V D15
22854	20680 22830 22850 22855	NCCI Policy Manual 2021 Chapter I E Chapter IV F + H Chapter V D15

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
22859	20680 22830 22850 22855	NCCI Policy Manual 2021 Chapter I E Chapter IV F + H Chapter V D15
22856	63077 77003	NCCI Policy Manual 2021 Chapter I E Chapter IX G Chapter IV H
22857	22830 38220 77003	NCCI Policy Manual 2021 Chapter I E Chapter IX G Chapter IV H
22861	63077 77003	NCCI Policy Manual 2021 Chapter I E Chapter IX G Chapter IV H
22862	22830 77003	NCCI Policy Manual 2021 Chapter I E Chapter IX G Chapter IV H
22864	63077 77003	NCCI Policy Manual 2021 Chapter I E Chapter IX G Chapter IV H
22865	22830 77003	NCCI Policy Manual 2021 Chapter I E Chapter IX G Chapter IV H
22867	77001 77002 77003 22869	CPT Text/Definition
22869	77001 77002 77003	CPT Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
23020	S2300	NCCI Policy Manual 2021 Chapter IV E
23035	29822	NCCI Policy Manual 2021 Chapter IV E
23040	29805 S2300	NCCI Policy Manual 2021 Chapter IV E
23100	S2300	NCCI Policy Manual 2021 Chapter IV E
23105	S2300	NCCI Policy Manual 2021 Chapter IV E
23107	S2300	NCCI Policy Manual 2021 Chapter IV E
23125	29805	NCCI Policy Manual 2021 Chapter IV E
23130	23044	Maintain CCI Logic NCCI Policy Chapter I C8
23140	20982 23035	NCCI Policy Manual 2021 Chapter I C 9 + 10
23145	20982 23035 29822	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
23146	20982 23035 29822	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
23150	20982 23035 29822	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
23155	20982 23035 29822	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
23156	20982 23035 29822	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
23170	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
23172	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
23174	20982 29822	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
23180	20982 29822	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
23182	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
23184	20982 29822	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
23190	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
23195	20982 29822	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
23200	20982 29822	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
23210	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
23220	20982 29822	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
23333	29822	NCCI Policy Manual 2021 Chapter IV E
23395	29822	NCCI Policy Manual 2021 Chapter IV E
23397	29822	NCCI Policy Manual 2021 Chapter IV E
23405	29822	NCCI Policy Manual 2021 Chapter IV E
23406	29822	NCCI Policy Manual 2021 Chapter IV E
23412	29822	NCCI Policy Manual 2021 Chapter IV E

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
23415	29822 29827	NCCI Policy Manual 2021 Chapter IV E
23420	29822	NCCI Policy Manual 2021 Chapter IV E
23430	29822	NCCI Policy Manual 2021 Chapter IV E
23440	29822	NCCI Policy Manual 2021 Chapter IV E
23450	29807 29822 29827 S2300	NCCI Policy Manual 2021 Chapter IV E
23455	29807 29822 29827 S2300	NCCI Policy Manual 2021 Chapter IV E
23460	29807 29822 29827 S2300	NCCI Policy Manual 2021 Chapter IV E
23462	29807 29822 29827 S2300	NCCI Policy Manual 2021 Chapter IV E
23465	29807 29822 29827 S2300	NCCI Policy Manual 2021 Chapter IV E
23466	29807 29822 29827 S2300	NCCI Policy Manual 2021 Chapter IV E
23470	29058 29075 29827 29837 S2300	NCCI Policy Manual 2021 Chapter IV E
23471	29058 29075 29837	NCCI Policy Manual 2021 Chapter IV E

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
23472	29827	NCCI Policy Manual 2021 Chapter IV E
23473	29827 64455	CCI code pairs similar code 23472
23474	29827 64455	CCI code pairs similar code 23472
23480	29822	NCCI Policy Manual 2021 Chapter IV E
23485	29822	NCCI Policy Manual 2021 Chapter IV E
23490	29822	NCCI Policy Manual 2021 Chapter IV E
23491	29822	NCCI Policy Manual 2021 Chapter IV E
23532	29822	NCCI Policy Manual 2021 Chapter IV E
23552	29822	NCCI Policy Manual 2021 Chapter IV E
23615	29822	NCCI Policy Manual 2021 Chapter IV E
23616	29822	NCCI Policy Manual 2021 Chapter IV E
23670	23630 29822	NCCI Policy Manual 2021 Chapter I C (9 + 10 + 11) + E Chapter IV E

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
23680	29822	NCCI Policy Manual 2021 Chapter IV E
23802	29822	NCCI Policy Manual 2021 Chapter IV E
23920	29822	NCCI Policy Manual 2021 Chapter IV E
24102	24100	NCCI Policy Manual 2021 Chapter I H + K
24110	20982 23935	NCCI Policy Manual 2021 Chapter I C (9 + 10 + 11) + E Chapter IV E
24115	20982 23935	NCCI Policy Manual 2021 Chapter I C (9 + 10 + 11) + E Chapter IV E
24116	20982 23935	NCCI Policy Manual 2021 Chapter I C (9 + 10 + 11) + E Chapter IV E
24120	20982 23935	NCCI Policy Manual 2021 Chapter I C (9 + 10 + 11) + E Chapter IV E
24125	20982 23935	NCCI Policy Manual 2021 Chapter I C (9 + 10 + 11) + E Chapter IV E

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
24126	20982 23935	NCCI Policy Manual 2021 Chapter I C (9 + 10 + 11) + E Chapter IV E
24130	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
24134	20982 29837	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
24136	20982 29837	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
24138	20982 29837	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
24140	20982 29837	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
24145	20982 29837	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
24147	20982 29837	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
24149	0312T 0313T 0314T 0315T 0316T	CCI code pairs similar code 64590

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
24150	20982 29837	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
24152	20982 29837	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
24155	29837	NCCI Policy Manual 2021 Chapter IV E
24301	29837	NCCI Policy Manual 2021 Chapter IV E
24305	29837	NCCI Policy Manual 2021 Chapter IV E
24310	29837	NCCI Policy Manual 2021 Chapter IV E
24320	29837	NCCI Policy Manual 2021 Chapter IV E
24330	29837	NCCI Policy Manual 2021 Chapter IV E
24331	29837	NCCI Policy Manual 2021 Chapter IV E
24332	20520 20525 20550 20551	NCCI Policy Manual 2021 Chapter I L + M
24340	24332	NCCI Policy Manual 2021 Chapter I J

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
24341	0312T 0313T 0314T 0315T 0316T 29837	CCI code pairs similar code 64590
24342	29837	NCCI Policy Manual 2021 Chapter IV E
24343	23930 29240	Maintain CCI Logic CPT Text/Definition
24344	23930 24301 24305 24310 24320 24330 24331 24340 24342 29240	Maintain CCI Logic CPT Text/Definition
24345	23930 29240	Maintain CCI Logic CPT Text/Definition
24346	23930 24301 24305 24310 24320 24330 24331 24340 24341 24342 24343 29240	Maintain CCI Logic CPT Text/Definition
24360	24160 29837	NCCI Policy Manual 2021 Chapter I C (9 + 10 + 11) + E Chapter IV E
24361	29837	NCCI Policy Manual 2021 Chapter IV E
24362	29837	NCCI Policy Manual 2021 Chapter IV E
24363	29837	NCCI Policy Manual 2021 Chapter IV E
24365	29837	NCCI Policy Manual 2021 Chapter IV E

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
24366	24164 29837	NCCI Policy Manual 2021 Chapter I C (9 + 10 + 11) + E Chapter IV E
24370	29058 29075 29837	CCI code pairs similar code 64590
24371	29058 29075 29837	CCI code pairs similar code 24360
24400	29837	NCCI Policy Manual 2021 Chapter IV E
24410	29837	NCCI Policy Manual 2021 Chapter IV E
24420	29837	NCCI Policy Manual 2021 Chapter IV E
24430	29837	NCCI Policy Manual 2021 Chapter IV E
24435	29837	NCCI Policy Manual 2021 Chapter IV E
24470	29837	NCCI Policy Manual 2021 Chapter IV E
24515	29837	NCCI Policy Manual 2021 Chapter IV E
24516	29837	NCCI Policy Manual 2021 Chapter IV E
24535	29837	NCCI Policy Manual 2021 Chapter IV E

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
24538	29837	NCCI Policy Manual 2021 Chapter IV E
24545	29837	NCCI Policy Manual 2021 Chapter IV E
24546	29837	NCCI Policy Manual 2021 Chapter IV E
24566	29837	NCCI Policy Manual 2021 Chapter IV E
24575	29837	NCCI Policy Manual 2021 Chapter IV E
24577	29837	NCCI Policy Manual 2021 Chapter IV E
24579	29837	NCCI Policy Manual 2021 Chapter IV E
24582	29837	NCCI Policy Manual 2021 Chapter IV E
24586	25394 25430 25431 29837	NCCI Policy Manual 2021 Chapter I C+E Chapter IV E
24587	25394 25430 25431 29837	NCCI Policy Manual 2021 Chapter I C+E Chapter IV E
24615	29837	NCCI Policy Manual 2021 Chapter IV E
24620	29837	NCCI Policy Manual 2021 Chapter IV E

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
24635	25394 25430 25431 29837	NCCI Policy Manual 2021 Chapter I C+E Chapter IV E
24650	20526	NCCI Policy Manual 2021 Chapter I L + M
24655	20526	NCCI Policy Manual 2021 Chapter I L + M
24665	25394 25430 25431 29837	NCCI Policy Manual 2021 Chapter I C+E Chapter IV E
24666	24343 25394 25430 25431 29837	NCCI Policy Manual 2021 Chapter I C+E Chapter IV E
24685	29837	NCCI Policy Manual 2021 Chapter IV E
24900	24925 29837	NCCI Policy Manual 2021 Chapter I C+E Chapter IV E
24920	24900 24925 29837	NCCI Policy Manual 2021 Chapter I C+E Chapter IV E
24925	29837	NCCI Policy Manual 2021 Chapter IV E
24930	24900 24920 24925 29837	NCCI Policy Manual 2021 Chapter I C+E Chapter IV E
24931	24900 24920 24925 24930 29837	NCCI Policy Manual 2021 Chapter I C+E Chapter IV E
24935	29837	NCCI Policy Manual 2021 Chapter IV E

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
25020	25001	NCCI Policy Manual 2021 Chapter I L + M
25023	25001	NCCI Policy Manual 2021 Chapter I L + M
25024	25001 29848	NCCI Policy Manual 2021 Chapter I L + M
25025	25001 29848	NCCI Policy Manual 2021 Chapter I C + L + M
25065	10030	NCCI Policy Manual 2021 Chapter 1 C7
25066	10030	NCCI Policy Manual 2021 Chapter 1 C7
25085	25001	NCCI Policy Manual 2021 Chapter I L + M
25105	25001	NCCI Policy Manual 2021 Chapter I L + M
25107	25671	NCCI Policy Manual 2021 Chapter I L + M
25116	25001	NCCI Policy Manual 2021 Chapter I L + M
25125	20982	NCCI Policy Manual 2018 Chapter I C 10 + 11
25126	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
25130	20982 25035	NCCI Policy Manual 2021 Chapter I C 8 + 9 + 10
25135	20982 25035	NCCI Policy Manual 2021 Chapter I C 8 + 9 + 10
25136	20982 25035	NCCI Policy Manual 2021 Chapter I C 8 + 9 + 10
25145	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
25150	20982	NCCI Policy Manual 2021 Chapter I C 10 + 12
25151	20982	NCCI Policy Manual 2021 Chapter I C 10 + 13
25170	20982	NCCI Policy Manual 2021 Chapter I C 10 + 14
25210	20982	NCCI Policy Manual 2021 Chapter I C 10 + 15
25215	20982	NCCI Policy Manual 2021 Chapter I C 10 + 16
25240	25394 25430 25431	NCCI Policy Manual 2021 Chapter I K + L
25246	25275 25394 25430 25431	NCCI Policy Manual 2021 Chapter I K + L + M
25259	11010 11011 11012 29065 29075 29085 29105 29125 29126 29260	Maintain CCI Logic Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
25265	25263	NCCI Policy Manual 2021 Chapter I K + L
25274	25272	NCCI Policy Manual 2021 Chapter I K + L
25275	25259 29848 37618	NCCI Policy Manual 2021 Chapter IV H Chapter III L
25300	25001	NCCI Policy Manual 2021 Chapter I K + L + M
25312	25310	NCCI Policy Manual 2021 Chapter I K + L + M
25332	25001	NCCI Policy Manual 2021 Chapter I K + L + M
25335	25001	NCCI Policy Manual 2021 Chapter I K + L + M
25337	25671	NCCI Policy Manual 2021 Chapter I K + L + M
25365	25360 25394 25430 25431	NCCI Policy Manual 2021 Chapter I H + L + M
25375	25370	NCCI Policy Manual 2021 Chapter I K + L + M
25392	25390	NCCI Policy Manual 2021 Chapter I K + L + M
25394	25000 25001 25100 25101 25105 25107 25600 25605 25606 25607 25608 25609 29848 64719 64721	CCI code pairs similar codes 25360 + 29848

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
25415	25671	NCCI Policy Manual 2021 Chapter I L + M
25430	25000 25001 25085 25100 25101 25105 25107 25115 25116 25259 25295 25320 25394 25600 25605 25606 25607 25608 25609 29848 64719 64721	NCCI Policy Manual 2021 Chapter I L + M
25431	25000 25001 25107 25115 25116 25210 25215 25259 25295 25600 25605 25606 25607 25608 25609 29848 64719 64721	NCCI Policy Manual 2021 Chapter I L + M
25442	25394 25430 25431	NCCI Policy Manual 2021 Chapter I L + M
25443	25001	NCCI Policy Manual 2021 Chapter I L + M
25444	25001	NCCI Policy Manual 2021 Chapter I L + M
25445	25001	NCCI Policy Manual 2021 Chapter I L + M
25446	25001 25394 25430 25431 25441	NCCI Policy Manual 2021 Chapter I H + L + M
25449	25001 25430 25431	NCCI Policy Manual 2021 Chapter I L + M
25450	25490 25491 25492	NCCI Policy Manual 2021 Chapter I L + M
25455	25450 25490 25491 25492	NCCI Policy Manual 2021 Chapter I L + M
25492	25490 25491	NCCI Policy Manual 2021 Chapter I H + L + M

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
25515	25520	NCCI Policy Manual 2021 Chapter IV F + H
25525	25671	NCCI Policy Manual Chapter I L+M Chapter IV E
25526	25500 25505 25515 25525 25671	NCCI Policy Manual Chapter I L+M Chapter IV E
25560	25530 25535	NCCI Policy Manual Chapter I L+M Chapter IV E
25565	25530 25535 25545	NCCI Policy Manual 2021 Chapter I H Chapter IV F
25575	25530 25535 25545	NCCI Policy Manual Chapter I H Chapter IV E
25600	25651	NCCI Policy Manual 2021 Chapter IV G 15
25605	25651	NCCI Policy Manual 2021 Chapter IV G 15
25607	25651	NCCI Policy Manual 2021 Chapter IV G 15
25608	25651	NCCI Policy Manual 2021 Chapter IV G 15
25609	25651	NCCI Policy Manual 2021 Chapter IV G 15
25628	25001	NCCI Policy Manual 2021 Chapter I L + M

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
25645	25001	NCCI Policy Manual 2021 Chapter I L + M
25695	25001	NCCI Policy Manual 2021 Chapter I L + M
25800	25001	NCCI Policy Manual 2021 Chapter I L + M
25805	25001	NCCI Policy Manual 2021 Chapter I L + M
25810	25001	NCCI Policy Manual 2021 Chapter I L + M
25820	25001	NCCI Policy Manual 2021 Chapter I L + M
25825	25001	NCCI Policy Manual 2021 Chapter I L + M
25830	25001 25671	NCCI Policy Manual 2021 Chapter I L + M
25920	25001	NCCI Policy Manual 2021 Chapter I L + M
25922	25001	NCCI Policy Manual 2021 Chapter I L + M
25924	25001	NCCI Policy Manual 2021 Chapter I L + M
25927	26040	NCCI Policy Manual 2021 Chapter I C8 Chapter I L

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
25929	26040	NCCI Policy Manual 2021 Chapter I C8 Chapter I L
25931	26040	NCCI Policy Manual 2021 Chapter I C8 Chapter I L
26075	29902	NCCI Policy Manual 2021 Chapter IV E
26105	29902	NCCI Policy Manual 2021 Chapter IV E
26116	26040	NCCI Policy Manual 2021 Chapter I C8 Chapter I L
26117	26040	NCCI Policy Manual 2021 Chapter I C8 Chapter I L
26123	26040	NCCI Policy Manual 2021 Chapter I C8 Chapter I L
26135	29902	NCCI Policy Manual 2021 Chapter IV E
26140	26110	Maintain CCI Logic NCCI Policy Chapter I C7
26160	26040	NCCI Policy Manual 2021 Chapter I C8 Chapter I L
26185	0312T 0313T 0314T 0315T 0316T	CCI code pairs similar code 64590
26200	20982	NCCI Policy Manual 2021 Chapter I C

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
26205	20982	NCCI Policy Manual 2021 Chapter I C
26210	20982 26034	NCCI Policy Manual 2021 Chapter I C +I L+ M
26215	20982 26034	NCCI Policy Manual 2021 Chapter I C +I L+ M
26230	20982	NCCI Policy Manual 2021 Chapter I C
26235	20982	NCCI Policy Manual 2021 Chapter I C
26236	20982	NCCI Policy Manual 2021 Chapter I C
26250	26040	NCCI Policy Manual 2021 Chapter I C8 Chapter I L
26260	26040	NCCI Policy Manual 2021 Chapter I C8 Chapter I L
26340	11010 11011 11012 20551 20552 20553 29075 29086 29130 29131 29280	Maintain CCI Logic CPT Text/Definition
26356	26357	NCCI Policy Manual 2021 Chapter I C + L
26492	26490 26494 26496	NCCI Policy Manual 2021 Chapter I H + L + M
26494	26490	NCCI Policy Manual 2021 Chapter I H + L + M

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
26496	26490 26494	NCCI Policy Manual 2021 Chapter I H + L + M
26498	26497	NCCI Policy Manual 2021 Chapter I H + L + M
26516	29900 29901 29902	NCCI Policy Manual 2021 Chapter IV E
26517	26516 29900 29901 29902	NCCI Policy Manual 2021 Chapter I L+M Chapter IV D
26518	26516 26517 29900 29901 29902	NCCI Policy Manual 2021 Chapter I L+M Chapter IV D
26530	26320	NCCI Policy Manual 2021 Chapter 1 L + M
26531	26320 26530	NCCI Policy Manual 2021 Chapter I J+L+M Chapter IV D
26535	26320	NCCI Policy Manual 2021 Chapter 1 L + M
26536	26320 26535	NCCI Policy Manual 2021 Chapter I H + J +
26540	29900 29901	NCCI Policy Manual 2021 Chapter IV E
26541	29900 29901	NCCI Policy Manual 2021 Chapter IV E
26542	26541 29900 29901	NCCI Policy Manual 2021 Chapter I L + M Chapter IV D

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
26546	0312T 0313T 0314T 0315T 0316T 20955 20956 20957 20962 20969 20970 20972 20973	NCCI Policy Manual 2021 Chapter IV H CCI code pairs similar code 64590
26551	0312T 0313T 0314T 0315T 0316T 20900 20902 20955 20956 20957 20962 20969 20970 20972 20973	NCCI Policy Manual 2021 Chapter IV H CCI code pairs similar code 64590
26553	0312T 0313T 0314T 0315T 0316T 20900 20902 20955 20956 20957 20962 20969 20970 20972 20973	NCCI Policy Manual 2021 Chapter IV H CCI code pairs similar code 64590
26554	0312T 0313T 0314T 0315T 0316T 20900 20902 20955 20956 20957 20962 20969 20970 20972 20973 26553	NCCI Policy Manual 2021 Chapter IV H CCI code pairs similar code 64590
26556	0312T 0313T 0314T 0315T 0316T	CCI code pairs similar code 64590
26607	26600 26605	Maintain CCI Logic NCCI Policy Chapter I H
26645	26641	Maintain CCI Logic NCCI Policy Chapter I L+M
26700	29900 29901 29902	NCCI Policy Manual 2021 Chapter IV E

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
26705	29900 29901 29902	NCCI Policy Manual 2021 Chapter IV E
26706	29900 29901 29902	NCCI Policy Manual 2021 Chapter IV E
26715	29900 29901 29902	NCCI Policy Manual 2021 Chapter IV E
26740	29900 29901 29902	NCCI Policy Manual 2021 Chapter IV E
26742	29900 29901 29902	NCCI Policy Manual 2021 Chapter IV E
26746	29900 29901 29902	NCCI Policy Manual 2021 Chapter IV E
26842	20955 20956 20957 20962 20969 20970 20972 20973	NCCI Policy Manual 2021 Chapter IV F
26952	26951	Maintain CCI Logic NCCI Policy Chapter I L+M
27036	0312T 0313T 0314T 0315T 0316T	CCI code pairs similar code 64590
27048	27025	NCCI Policy Manual 2021 Chapter I C 8
27049	27025	NCCI Policy Manual 2021 Chapter I C 8
27054	27052	NCCI Policy Manual 2021 Chapter I C 8

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
27065	20982 26992	NCCI Policy Manual 2021 Chapter I C + L + M
27066	20982 26992	NCCI Policy Manual 2021 Chapter I C + L + M
27067	20982 26992 27065 27066	NCCI Policy Manual 2021 Chapter I C + L + M
27070	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
27071	20982 27070	NCCI Policy Manual 2021 Chapter I C + L + M
27075	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
27076	20982 27075	NCCI Policy Manual 2021 Chapter I C + L + M
27077	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
27078	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
27096	G0260	CPT/HCPCS Text/Definition
27140	29914 29915 29916	NCCI Policy Manual 2021 Chapter IV E
27146	29914 29915 29916	NCCI Policy Manual 2021 Chapter IV E
27147	29914 29915 29916	NCCI Policy Manual 2021 Chapter IV E

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
27151	29914 29915 29916	NCCI Policy Manual 2021 Chapter IV E
27156	29914 29915 29916	NCCI Policy Manual 2021 Chapter IV E
27158	29914 29915 29916	NCCI Policy Manual 2021 Chapter IV E
27161	29914 29915 29916	NCCI Policy Manual 2021 Chapter IV E
27176	27175	Maintain CCI Logic NCCI Policy Chapter I H
27198	27197	Maintain CCI Logic NCCI Policy Chapter I H
27238	G0168	NCCI Policy Manual 2021 Chapter IV I 5
27240	G0168	NCCI Policy Manual 2021 Chapter IV I 5
27244	G0168	NCCI Policy Manual 2021 Chapter IV I 5
27245	G0168	NCCI Policy Manual 2021 Chapter IV I 5
27246	G0168	NCCI Policy Manual 2021 Chapter IV I 5
27248	G0168	NCCI Policy Manual 2021 Chapter IV I 5

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
27250	G0168	NCCI Policy Manual 2021 Chapter IV I 5
27252	G0168	NCCI Policy Manual 2021 Chapter IV I 5
27253	G0168	NCCI Policy Manual 2021 Chapter IV I 5
27254	G0168	NCCI Policy Manual 2021 Chapter IV I 5
27295	27284	Maintain CCI Logic
27323	29870	NCCI Policy Manual 2021 Chapter IV E
27328	29873	NCCI Policy Manual 2021 Chapter IV E
27329	29873	NCCI Policy Manual 2021 Chapter IV E
27331	29870 29873	NCCI Policy Manual 2021 Chapter IV E
27332	29868 29870 29873	NCCI Policy Manual 2021 Chapter IV E
27333	29868 29873	NCCI Policy Manual 2021 Chapter IV E
27334	29873	NCCI Policy Manual 2021 Chapter IV E
27335	29873	NCCI Policy Manual 2021 Chapter IV E

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
27340	29870	NCCI Policy Manual 2021 Chapter IV E
27355	20982 27303	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
27356	20982 27303	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
27357	20982 27303	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
27360	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
27365	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
27403	29868	NCCI Policy Manual 2021 Chapter IV E
27415	20900 20902 20910 27332 29871 29873 29879 29884 29886 29887 29999	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
27422	29877	NCCI Policy Manual 2021 Chapter IV E
27425	29870	NCCI Policy Manual 2021 Chapter IV E

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
27428	29877	NCCI Policy Manual 2021 Chapter IV E
27437	29873	NCCI Policy Manual 2021 Chapter IV E
27438	29873	NCCI Policy Manual 2021 Chapter IV E
27440	29873	NCCI Policy Manual 2021 Chapter IV E
27441	29873	NCCI Policy Manual 2021 Chapter IV E
27442	29873	NCCI Policy Manual 2021 Chapter IV E
27443	29873	NCCI Policy Manual 2021 Chapter IV E
27445	29873	NCCI Policy Manual 2021 Chapter IV E
27446	29873	NCCI Policy Manual 2021 Chapter IV E
27447	29873	NCCI Policy Manual 2021 Chapter IV E
27455	29873	NCCI Policy Manual 2021 Chapter IV E
27457	27455 29873	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
27475	27495	NCCI Policy Manual 2021 Chapter I
27479	27495	NCCI Policy Manual 2021 Chapter I
27486	29873	NCCI Policy Manual 2021 Chapter IV E
27487	29873	NCCI Policy Manual 2021 Chapter IV E
27488	29873	NCCI Policy Manual 2021 Chapter IV E
27507	27508	NCCI Policy Manual 2021 Chapter I L Chapter IV F
27509	27508	NCCI Policy Manual 2021 Chapter I L Chapter IV F
27524	29870	NCCI Policy Manual 2021 Chapter IV E
27566	29870	NCCI Policy Manual 2021 Chapter IV E
27591	27592 27594 27596	NCCI Policy Manual 2021 Chapter I
27592	27594	NCCI Policy Manual 2021 Chapter I
27596	27592 27594	NCCI Policy Manual 2021 Chapter I

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
27607	29897	NCCI Policy Manual 2021 Chapter IV E
27610	29897	NCCI Policy Manual 2021 Chapter IV E
27612	29897	NCCI Policy Manual 2021 Chapter IV E
27625	27613 29897	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
27626	29897	NCCI Policy Manual 2021 Chapter IV E
27630	29897	NCCI Policy Manual 2021 Chapter IV E
27635	20982 29897	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
27637	20982 29897	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
27638	20982 29897	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
27640	20982 29897	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
27641	20982 29897	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
27645	20982 29897	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
27646	20982 29897	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
27647	20982 29897	NCCI Policy Manual 2021 Chapter I C 10 + 11 Chapter IV E
27650	29897	NCCI Policy Manual 2021 Chapter IV E
27652	29897	NCCI Policy Manual 2021 Chapter IV E
27654	29897	NCCI Policy Manual 2021 Chapter IV E
27675	29897	NCCI Policy Manual 2021 Chapter IV E
27676	29897	NCCI Policy Manual 2021 Chapter IV E
27685	29897	NCCI Policy Manual 2021 Chapter IV E

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
27686	29897	NCCI Policy Manual 2021 Chapter IV E
27690	29897	NCCI Policy Manual 2021 Chapter IV E
27691	29897	NCCI Policy Manual 2021 Chapter IV E
27696	29897	NCCI Policy Manual 2021 Chapter IV E
27698	29897	NCCI Policy Manual 2021 Chapter IV E
27702	29897	NCCI Policy Manual 2021 Chapter IV E
27703	27704 29897	NCCI Policy Manual 2021 Chapter I C (9 + 10 + 11) + E Chapter IV E
27705	29897	NCCI Policy Manual 2021 Chapter IV E
27709	29897	NCCI Policy Manual 2021 Chapter IV E
27712	29897	NCCI Policy Manual 2021 Chapter IV E
27715	29897	NCCI Policy Manual 2021 Chapter IV E
27720	29897	NCCI Policy Manual 2021 Chapter IV E

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
27722	29897	NCCI Policy Manual 2021 Chapter IV E
27724	29897	NCCI Policy Manual 2021 Chapter IV E
27725	29897	NCCI Policy Manual 2021 Chapter IV E
27727	29897	NCCI Policy Manual 2021 Chapter IV E
27730	29897	NCCI Policy Manual 2021 Chapter IV E
27732	29897	NCCI Policy Manual 2021 Chapter IV E
27734	29897	NCCI Policy Manual 2021 Chapter IV E
27740	29897	NCCI Policy Manual 2021 Chapter IV E
27742	29897	NCCI Policy Manual 2021 Chapter IV E
27745	29897	NCCI Policy Manual 2021 Chapter IV E
27766	29897	NCCI Policy Manual 2021 Chapter IV E
27788	27786 29897	NCCI Policy Manual 2021 Chapter I C (9 + 10 + 11) + E Chapter IV E

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
27792	29897	NCCI Policy Manual 2021 Chapter IV E
27814	29897	NCCI Policy Manual 2021 Chapter IV E
27822	29897	NCCI Policy Manual 2021 Chapter IV E
27823	29897	NCCI Policy Manual 2021 Chapter IV E
27825	29897	NCCI Policy Manual 2021 Chapter IV E
27826	29897	NCCI Policy Manual 2021 Chapter IV E
27827	29897	NCCI Policy Manual 2021 Chapter IV E
27828	29897	NCCI Policy Manual 2021 Chapter IV E
27846	29897	NCCI Policy Manual 2021 Chapter IV E
27848	27827 27829 29897	NCCI Policy Manual 2021 Chapter I C (9 + 10 + 11) + E Chapter IV E
27870	29897	NCCI Policy Manual 2021 Chapter IV E
27871	29897	NCCI Policy Manual 2021 Chapter IV E

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
27880	29897	NCCI Policy Manual 2021 Chapter IV E
27881	27882 27884 27886 29897	NCCI Policy Manual 2021 Chapter I C (9 + 10 + 11) + E Chapter IV E
27882	27884 27886 29897	NCCI Policy Manual 2021 Chapter I C (9 + 10 + 11) + E Chapter IV E
27884	29897	NCCI Policy Manual 2021 Chapter IV E
27886	27884 29897	NCCI Policy Manual 2021 Chapter I C (9 + 10 + 11) + E Chapter IV E
27888	29897	NCCI Policy Manual 2021 Chapter IV E
27889	27870 29897	NCCI Policy Manual 2021 Chapter I C (9 + 10 + 11) + E Chapter IV E
27893	27892	NCCI Policy Manual 2021 Chapter I K + L
27894	27892 27893	NCCI Policy Manual 2021 Chapter I K + L
28102	20982 28005	NCCI Policy Manual 2021 Chapter I C 8 + 9 + 10

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
28103	20982 28005	NCCI Policy Manual 2021 Chapter I C 8 + 9 + 10
28104	20982 28005	NCCI Policy Manual 2021 Chapter I C 8 + 9 + 10
28106	20982 28005	NCCI Policy Manual 2021 Chapter I C 8 + 9 + 10
28107	20982 28005	NCCI Policy Manual 2021 Chapter I C 8 + 9 + 10
28108	20982 28005	NCCI Policy Manual 2021 Chapter I C 8 + 9 + 10
28110	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
28111	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
28112	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
28113	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
28114	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
28116	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
28118	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
28119	20982 28060 28062	NCCI Policy Manual 2021 Chapter I C + J
28120	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
28122	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
28124	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
28126	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
28130	20982	NCCI Policy Manual 2021 Chapter I C 10 + 11
28171	S2117	NCCI Policy Manual 2021 Chapter I L+M CPT/HCPCS Text/Definition
28173	S2117	NCCI Policy Manual 2021 Chapter I L+M CPT/HCPCS Text/Definition
28175	S2117	NCCI Policy Manual 2021 Chapter I L+M CPT/HCPCS Text/Definition
28210	28208	NCCI Policy Manual 2021 Chapter I H
28222	28220	NCCI Policy Manual 2021 Chapter I H

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
28270	28315	Maintain CCI Logic CPT Text/Definition
28286	S2117	NCCI Policy Manual 2021 Chapter I L+ M CPT/HCPCS Text/Definition
28288	S2117	NCCI Policy Manual 2021 Chapter I L+ M CPT/HCPCS Text/Definition
28289	20680 S2117	NCCI Policy Manual 2021 Chapter I L+ M CPT/HCPCS Text/Definition
28291	11732 28010 28011 28230 28232 28272 S2177	NCCI Policy Manual 2021 Chapter I L+ M CPT/HCPCS Text/Definition
28292	28230 28232 28272 S2117	NCCI Policy Manual 2021 Chapter I L+ M CPT/HCPCS Text/Definition
28295	11732 28010 28011 28230 28232 28272 28291 29296 S2177	NCCI Policy Manual 2021 Chapter I L+ M CPT/HCPCS Text/Definition
28296	28230 28232 28272 28291 S2117	NCCI Policy Manual 2021 Chapter I L+ M CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
28297	28232 28272 S2117	NCCI Policy Manual 2021 Chapter I J + L+ M CPT/HCPCS Text/Definition
28298	28230 28232 28272 S2117	NCCI Policy Manual 2021 Chapter I J + L+ M CPT/HCPCS Text/Definition
28299	28230 28232 28272 28308 S2117	NCCI Policy Manual 2021 Chapter I J + L+ M CPT/HCPCS Text/Definition
28345	15135 15150 15275 15277	Maintain CCI Logic CPT Text/Definition
28456	28455	NCCI Policy Manual 2021 Chapter I E + L+ M Chapter IV F
28475	28470	NCCI Policy Manual 2021 Chapter I E + H
28800	S2117	NCCI Policy Manual 2021 Chapter I J + L+ M CPT/HCPCS Text/Definition
28805	S2117	NCCI Policy Manual 2021 Chapter I J + L+ M CPT/HCPCS Text/Definition
28810	S2117	NCCI Policy Manual 2021 Chapter I J + L+ M CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
29086	29075 29130 29131 29280 76000 G0168	NCCI Policy Manual 2021 Chapter I E + L+ M
29805	S2300	NCCI Policy Manual 2021 Chapter I J + L+ M CPT/HCPCS Text/Definition
29806	S2300	NCCI Policy Manual 2021 Chapter I J + L+ M CPT/HCPCS Text/Definition
29824	29823	NCCI Policy Manual 2021 Chapter IV E
29827	20103 23000 23040 23075 23076 23405 23406 29823	NCCI Policy Manual 2021 Chapter I C (9 + 10 + 11) + E Chapter IV C + E
29861	29999	NCCI Policy Manual 2021 Chapter 1 Integral/Incident To
29862	29999	NCCI Policy Manual 2021 Chapter 1 Integral/Incident To
29863	29999	NCCI Policy Manual 2021 Chapter 1 Integral/Incident To
29866	20910 29999	NCCI Policy Manual 2021 Chapter IV C + I

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
29867	20900 29999	NCCI Policy Manual 2021 Chapter IV C + I
29868	20910 27347 29866 29867 29886 29887 29999	NCCI Policy Manual 2021 Chapter I C (9 + 10 + 11) + E Chapter IV C + E
29873	27310 27330 29445	NCCI Policy Manual 2021 Chapter I C (9 + 10 + 11) + E Chapter IV C + E
29885	27415	NCCI Policy Manual 2021 Chapter I C (9 + 10 + 11) + E Chapter IV C + E
29891	29897	NCCI Policy Manual 2021 Chapter I C (9 + 10 + 11) + E Chapter IV E
29899	11000 11042 20670 20680 20900 27829 27830 27831 27832 27840 27842 27846 29894 29895 29898	NCCI Policy Manual 2021 Chapter I C (9 + 10 + 11) + E Chapter IV C + E
29914	27006 27036 27062 27071 27187 29305 29325 29520 29999 29861 29862 29863 76000	NCCI Policy Manual 2021 Chapter IV H Integral/Incident To
29915	27006 27036 27062 27071 27187 29305 29325 29520 29999 29861 29862 29863 76000	NCCI Policy Manual 2021 Chapter IV H Integral/Incident To

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
29916	27006 27036 27062 27071 27187 29305 29325 29520 29999 29861 29862 29863 76000	NCCI Policy Manual 2021 Chapter IV H Integral/Incident To
30100	10030	NCCI Policy Manual 2021 Chapter 1 C7
30110	30801 30802	NCCI Policy Manual 2021 Chapter V C
30115	30802	NCCI Policy Manual 2021 Chapter V C
30117	30100 30801 30802	NCCI Policy Manual 2021 Chapter V C
30118	30100 30801 30802	NCCI Policy Manual 2021 Chapter V C
30120	30100 30801 30802	NCCI Policy Manual 2021 Chapter V C
30124	30100 30801 30802	NCCI Policy Manual 2021 Chapter V C
30125	30100 30801 30802	NCCI Policy Manual 2021 Chapter V C
30130	30100	NCCI Policy Manual 2021 Chapter V C
30140	30100	NCCI Policy Manual 2021 Chapter V C
30150	30801 30802 30930	NCCI Policy Manual 2021 Chapter V C

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
30160	30801 30802 30930	NCCI Policy Manual 2021 Chapter V C
30210	30801 30802	NCCI Policy Manual 2021 Chapter V C
30220	30801 30802	NCCI Policy Manual 2021 Chapter V C
30300	30801 30802	NCCI Policy Manual 2021 Chapter V C
30310	30801 30802	NCCI Policy Manual 2021 Chapter V C
30320	30801 30802	NCCI Policy Manual 2021 Chapter V C
30400	30801 30802 30930	NCCI Policy Manual 2021 Chapter V C
30410	30801 30802 30930	NCCI Policy Manual 2021 Chapter V C
30420	30801 30802 30930	NCCI Policy Manual 2021 Chapter V C
30430	30801 30802 30930	NCCI Policy Manual 2021 Chapter V C
30435	30801 30802 30930	NCCI Policy Manual 2021 Chapter V C
30450	30801 30802 30930	NCCI Policy Manual 2021 Chapter V C

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
30460	30801 30802 30930	NCCI Policy Manual 2021 Chapter V C
30462	30801 30802 30930	NCCI Policy Manual 2021 Chapter V C
30465	30801 30802 30930	NCCI Policy Manual 2021 Chapter V C
30520	30802 30930	NCCI Policy Manual 2021 Chapter V C
30540	30801 30802 30930	NCCI Policy Manual 2021 Chapter V C
30545	30801 30802 30930	NCCI Policy Manual 2021 Chapter V C
30560	30930	NCCI Policy Manual 2021 Chapter V C
30580	30801 30802 30930	NCCI Policy Manual 2021 Chapter V C + H
30600	30801 30802 30930	NCCI Policy Manual 2021 Chapter V C
30620	30100 30801 30802 30930	NCCI Policy Manual 2021 Chapter V C
30630	30802 30930	NCCI Policy Manual 2021 Chapter V C
31020	30100 30801 30802 30930 31231 31233 31235 31237 31238 31239 31240	NCCI Policy Manual 2021 Chapter 1C Chapter V C20 Open vs Endoscopic

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
31030	30100 30801 30802 31231 31233 31235 31237 31238 31239 31240	NCCI Policy Manual 2021 Chapter 1C Chapter V C20 Open vs Endoscopic
31032	30100 30801 30802 31231 31233 31235 31237 31238 31239 31240	NCCI Policy Manual 2021 Chapter 1C Chapter V C20 Open vs Endoscopic
31040	30100 30801 30802 31231 31233 31235 31237 31238 31239 31240 31254 31255 31256 31267 31276 31287 31288	NCCI Policy Manual 2021 Chapter 1C Chapter V C20 Open vs Endoscopic
31050	30100 30801 30802 31231 31233 31235 31237 31238 31239 31240 31287 31288	NCCI Policy Manual 2021 Chapter 1C Chapter V C20 Open vs Endoscopic
31051	30100 30801 30802 31231 31233 31235 31237 31238 31239 31240 31287 31288	NCCI Policy Manual 2021 Chapter 1C Chapter V C20 Open vs Endoscopic
31070	30801 30802 31231 31233 31235 31237 31238 31239 31240	NCCI Policy Manual 2021 Chapter 1C Chapter V C20 Open vs Endoscopic
31075	30801 30802 31231 31233 31235 31237 31238 31239 31240	NCCI Policy Manual 2021 Chapter 1C Chapter V C20 Open vs Endoscopic
31080	30801 30802 31231 31233 32135 31237 31238 31239 31240	NCCI Policy Manual 2021 Chapter 1C Chapter V C20 Open vs Endoscopic

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
31081	30801 30802 31231 31233 31235 31237 31238 31239 31240	NCCI Policy Manual 2021 Chapter 1C Chapter V C20 Open vs Endoscopic
31084	30801 30802 31231 31233 31235 31237 31238 31239 31240	NCCI Policy Manual 2021 Chapter 1C Chapter V C20 Open vs Endoscopic
31085	30801 30802 31231 31233 31235 31237 31238 31239 31240	NCCI Policy Manual 2021 Chapter 1C Chapter V C20 Open vs Endoscopic
31086	30801 30802 31231 31233 31235 31237 31238 31239 31240	NCCI Policy Manual 2021 Chapter 1C Chapter V C20 Open vs Endoscopic
31087	30801 30802 31231 31233 31235 31237 31238 31239 31240	NCCI Policy Manual 2021 Chapter 1C Chapter V C20 Open vs Endoscopic
31090	30100 30801 30802 31231 31233 31235 31237 31238 31239 31240 31256 31267 31287 31288	NCCI Policy Manual 2021 Chapter 1C Chapter V C20 Open vs Endoscopic
31200	30802	NCCI Policy Manual 2021 Chapter V C 20
31201	30802	NCCI Policy Manual 2021 Chapter V C 20
31205	30801 30802	NCCI Policy Manual 2021 Chapter V C 20

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
31225	30100 30801 30802	NCCI Policy Manual 2021 Chapter V C 20
31230	30100 30801 30802	NCCI Policy Manual 2021 Chapter V C 20
31231	30100 30930	NCCI Policy Manual 2021 Chapter V C 20
31233	30100 30802 30930	NCCI Policy Manual 2021 Chapter V C 20
31235	30100 30802 30930	NCCI Policy Manual 2021 Chapter V C 20
31237	30100 30802 30930	NCCI Policy Manual 2021 Chapter V C 20
31238	30100 30930	NCCI Policy Manual 2018 Chapter V C
31239	30100 30802 30930	NCCI Policy Manual 2021 Chapter V C 20
31240	30100 30802 30930	NCCI Policy Manual 2021 Chapter V C 20
31254	30100 30802 30930	NCCI Policy Manual 2021 Chapter V C 20
31255	30100 30802 30930	NCCI Policy Manual 2021 Chapter V C 20
31256	30100 30802 30930	NCCI Policy Manual 2021 Chapter V C 20

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
31267	30100 30802 30930	NCCI Policy Manual 2021 Chapter V C 20
31276	30100 30802 30930	NCCI Policy Manual 2021 Chapter V C 20
31287	30100 30802 30930	NCCI Policy Manual 2021 Chapter V C 20
31288	30100 30802 30930	NCCI Policy Manual 2021 Chapter V C 20
31290	30802 30930 31020 31030 31032 31040 31050 31051 31070 31075 31080 31081 31084 31085 31086 31087 31090	NCCI Policy Manual 2021 Chapter V C
31291	30802 30930 31020 31030 31032 31040 31050 31051 31070 31075 31080 31081 31084 31085 31086 31087 31090	NCCI Policy Manual 2021 Chapter V C
31292	30802 30930 31020 31030 31032 31040 31050 31051 31070 31075 31080 31081 31084 31085 31086 31087 31090	NCCI Policy Manual 2021 Chapter V C
31293	30802 30930 31020 31030 31032 31040 31050 31051 31070 31075 31080 31081 31084 31085 31086 31087 31090	NCCI Policy Manual 2021 Chapter V C
31294	30802 30930 31020 31030 31032 31040 31050 31051 31070 31075 31080 31081 31084 31085 31086 31087 31090	NCCI Policy Manual 2021 Chapter V C
31296	31233 31256 31267	NCCI Policy Manual 2021 Chapter V C
31297	31233 31256 31267	NCCI Policy Manual 2021 Chapter V C
31545	31500 31511 31513 31515 31527 31528 31529 31530 31531 31560 31561 31570 31571 31577 31579	Maintain CCI Logic Policy Chapter V C NCCI

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
31546	31500 31511 31513 31515 31527 31528 31529 31530 31531 31560 31561 31570 31571 31577 31579	Maintain CCI Logic Policy Chapter V C NCCI
31551	31505 31510 31511 31512 31513 31515 31520 31525 31526 31527 31528 31529 31530 31531 31536 31540 31541 31560 31561 31570 31571 31575 31576 31577 31578 31579 31587 31590	Maintain CCI Logic Policy Chapter V C NCCI
31552	31505 31510 31511 31512 31513 31515 31520 31525 31526 31527 31528 31529 31530 31531 31536 31540 31541 31560 31561 31570 31571 31575 31576 31577 31578 31579 31587 31590	Maintain CCI Logic Policy Chapter V C NCCI
31553	31505 31510 31511 31512 31513 31515 31520 31525 31526 31527 31528 31529 31530 31531 31536 31540 31541 31551 31560 31561 31570 31571 31575 31576 31577 31578 31579 31587 31590	Maintain CCI Logic Policy Chapter V C NCCI
31554	31505 31510 31511 31512 31513 31515 31520 31525 31526 31527 31528 31529 31530 31531 31536 31540 31541 31552 31560 31561 31570 31571 31575 31576 31577 31578 31579 31587 31590	NCCI Policy Manual 2021 Chapter V C
31570	S2340	Maintain CCI Logic Policy Chapter V C NCCI
31571	S2340	Maintain CCI Logic Policy Chapter V C NCCI
31601	31600	Maintain CCI Logic Policy Chapter 1 H NCCI
31622	31500	NCCI Policy Manual Chapter I C9 + 10 + H + L
31632	76000 77002	CPT Text/Definition
31633	76000 77002	CPT Text/Definition
31634	31536 31540 31541	Maintain CCI Logic Text/Definition CPT

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
31636	31631 89220 96570	NCCI Policy Manual 2021 Chapter I C 9 + 10
31638	31637 31648 89220	NCCI Policy Manual 2021 Chapter I C 9 + 10 CCI code pairs similar code 31636
31647	31536 31540 31541 77001	CCI code pairs similar code 31636
31648	31630 31631	CCI code pairs similar code 31636
31785	31800	Maintain CCI Logic Coders Desk Reference
32096	10030 32604 32606 32650 32651 32652 32653 32654 32655 32656 32666 32658 32659 32661 32662 32664 32665	NCCI Policy Manual 2021 Chapter V C
32097	10030 32604 32606 32650 32651 32652 32653 32654 32655 32656 32666 32658 32659 32661 32662 32664 32665	NCCI Policy Manual 2021 Chapter V C
32098	10030 32604 32606 32650 32651 32652 32653 32654 32655 32656 32666 32658 32659 32661 32662 32664 32665	NCCI Policy Manual 2021 Chapter V C
32100	32604 32606 32650 32651 32652 32653 32654 32655 32656 32666 32658 32659 32661 32662 32664 32665	NCCI Policy Manual 2021 Chapter V C
32110	32601 32604 32606 32650 32651 32652 32653 32654 32655 32656 32666 32658 32659 32661 32662 32663 32664 32665	NCCI Policy Manual 2021 Chapter V C
32120	32604 32606 32650 32651 32652 32653 32654 32655 32656 32666 32658 32659 32661 32662 32663 32664 32665	NCCI Policy Manual 2021 Chapter V C

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
32124	32604 32606 32650 32651 32652 32653 32655 32656 32666 32658 32659 32661 32662 32663 32664 32665	NCCI Policy Manual 2021 Chapter V C
32140	32604 32606 32650 32651 32652 32653 32655 32656 32666 32658 32659 32661 32662 32663 32664 32665	NCCI Policy Manual 2021 Chapter V C
32141	32604 32606 32650 32651 32652 32653 32655 32656 32666 32658 32659 32661 32662 32663 32664 32665	NCCI Policy Manual 2021 Chapter V C
32150	32604 32606 32650 32651 32652 32653 32655 32656 32666 32658 32659 32661 32662 32663 32664 32665	NCCI Policy Manual 2021 Chapter V C
32151	32601 32604 32606 32608 32609 32650 32651 32652 32653 32655 32656 32666 32658 32659 32661 32662 32663 32664 32665	NCCI Policy Manual 2021 Chapter V C
32160	32604 32606 32650 32651 32652 32653 32655 32656 32666 32658 32659 32661 32662 32663 32664 32665	NCCI Policy Manual 2021 Chapter V C
32200	32201	Maintain CCI Logic NCCI Policy Chapter I H
32400	10030	NCCI Policy Manual 2021 Chapter 1 C7
32440	32200 32201	NCCI Policy Manual 2021 Chapter I L+M
32442	32200 32201	NCCI Policy Manual 2021 Chapter I L+M
32486	32491	NCCI Policy Manual 2021 Chapter I L+M
32488	32482	NCCI Policy Manual 2021 Chapter I L+M

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
32491	32480 32482 32484	NCCI Policy Manual 2021 Chapter I L+M
32503	31623 31624 31625 31643 32810 32815 32851 32852 32853 32854 32997 39010	NCCI Policy Manual 2021 Chapter V C
32504	31623 31624 31625 31643 32503 32810 32815 32851 32852 32853 32854 32905 32906 32997 39010	NCCI Policy Manual 2021 Chapter V C
32556	49423	NCCI Policy Manual 2021 Chapter I J Separate Procedure
32557	49423	NCCI Policy Manual 2021 Chapter I J Separate Procedure
32607	10030	NCCI Policy Manual 2021 Chapter 1 C7
32608	10030	NCCI Policy Manual 2021 Chapter 1 C7
32609	10030	NCCI Policy Manual 2021 Chapter 1 C7
32662	32661	NCCI Policy Manual 2021 Chapter I H
32663	32661 32662 S2061	NCCI Policy Manual 2021 Chapter I H
32850	33930 S2060	NCCI Policy Manual 2021 Chapter I H + L + M

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
32851	32850 33930 S2060	NCCI Policy Manual 2021 Chapter I H + L + M
32852	32850 33930 S2060	NCCI Policy Manual 2021 Chapter I H + L + M
32853	32850 32852 33930 S2060	NCCI Policy Manual 2021 Chapter I H + L + M
32854	32850 32851 33930 S2060	NCCI Policy Manual 2021 Chapter I H + L + M
33140	32096 32097 32098 32100 32110 33141	Maintain CCI Logic NCCI Policy Chapter V A+C
33215	33212 33213	CCI code pairs similar codes 33216 + 33217
33224	33225 33226	Maintain CCI Logic CPT/HCPCS Text/Definition
33249	33241	NCCI Policy Manual Incident To Service
33270	32100 33215 33216 33217 33230 33231 33240 33262 33263 33264 36005 36010 36011 36012 36013 36140 36555 36556 36568 36569 39010 77001 77002	CCI code pairs similar code 33249 + deleted code 0319T
33271	32100 33215 33216 33217 33230 33231 36005 36010 36011 36012 36013 36140 36555 36556 36568 36569 39010 77001 77002	CCI code pairs similar code 33216 + deleted code 0320T
33272	32100 33215 33216 33217 33230 33231 33240 33262 33263 33264 36005 36010 36011 36012 36013 36140 36555 36556 36568 36569 39010 77001 77002	CCI code pairs similar code 33244 + deleted code 0324T
33273	32100 33215 33216 33217 33230 33231 33240 33262 33263 33264 36005 36010 36011 36012 36013 36140 36555 36556 36568 36569 39010 77001 77002	CCI code pairs similar code 33262 + deleted code 0325T

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
33361	33254 33255 33256 35820 36621 92960	CCI code pairs similar code 33405
33362	33254 33255 33256 35820 36621 92960	CCI code pairs similar code 33405
33363	33254 33255 33256 35820 36621 92960	CCI code pairs similar code 33405
33364	33254 33255 33256 35820 36621 92960	CCI code pairs similar code 33405
33365	33254 33255 33256 35820 36621 92960	CCI code pairs similar code 33405
33366	33210 33211 35226 35820 36221 92960	Code pairs on deleted code 0318T
33391	33390	NCCI Policy Manual 2021 Chapter I H
33405	33390 33391	Maintain CCI Logic CPT Text/Definition
33406	33390 33391	Maintain CCI Logic CPT Text/Definition
33502	33507	CPT Text/Definition
33503	33507	CPT Text/Definition
33504	33507	CPT Text/Definition
33505	33507	CPT Text/Definition
33507	33506 33572 35211 35216 92920	Maintain CCI Logic CPT TextDefinition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
33510	S2207	CPT/HCPCS Text/Definition
33517	S2208 S2209	CPT/HCPCS Text/Definition
33530	33140	CPT Text/Definition
33533	S2205 S2208 S2209	CPT/HCPCS Text/Definition
33534	S2206	CPT/HCPCS Text/Definition
33548	35226	CPT Text/Definition
33736	93580 93581	CPT Text/Definition
33737	93580 93581	CPT Text/Definition
33780	33681	NCCI Policy Manual 2021 Chapter I L
33782	33361 33362 33363 33364 33365 33366	CCI code pairs similar code 33405
33783	33361 33362 33363 33364 33366	CCI code pairs similar code 33405
33860	33880 33881 33883 33886	Maintain CCI Logic
33863	33361 33362 33363 33364 33365 33366 33880 33881 33883 33886	Maintain CCI Logic CCI code pairs similar code 33405
33864	33361 33362 33363 33364 33365 33366 33880 33881 33883 33886	Maintain CCI Logic CCI code pairs similar code 33405
33880	0075T 35001 35021 35206 35226 75958	Maintain CCI Logic Text/Definition CPT

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
33881	0075T 35206 35226	Maintain CCI Logic CPT Text/Definition
33883	0075T 35001 35021 35206 35226 75956 75959	Maintain CCI Logic CPT Text/Definition
33886	0075T 35001 35021 35206 35226	Maintain CCI Logic CPT Text/Definition
33926	35226	Maintain CCI Logic
33930	S2060	CPT/HCPCS Text/Definition
33967	36221 36222 36223 36224 36225 36226	CCI code pairs similar code 33405
33973	33967	NCCI Policy Manual 2021 Chapter I L
33975	33992 33993	CCI code pairs similar code 33977
33976	33992 33993	CCI code pairs similar code 33977
33978	33993	CCI code pairs similar code 33977
33979	33977 33978 33992 33993	CPT Text/Definition CCI code pairs similar codes 33975 33977
33981	33993	CCI code pair similar code 33977

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
33982	33993	CCI code pair similar code 33977
33983	33993	CCI code pair similar code 33977
33990	32551 33210 33211 33254 33255 33256 33310 33315 33404 33927 39000 39010 93750	CCI code pair similar code 33975
33991	32551 33210 33211 33254 33255 33256 33310 33315 33404 33927 39000 39010 93750	CCI code pair similar code 33975
33992	32551 33210 33211 33254 33255 33256 33310 33315 35820 39000 39010	CCI code pair similar code 33977
33993	32551 33210 33211 33254 33255 33256 33310 33315 35820 39000 39010	CCI code pair similar code 33977
34151	36221	CCI code pair similar code 36200
34201	36221	CCI code pair similar code 36200
34830	36221 37220 37221 61635 76937	Maintain CCI Logic CPT Text/Definition CCI code pair similar code 36200
34831	36221 37220 37221 61635 76937	Maintain CCI Logic CPT Text/Definition CCI code pair similar code 36200

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
34832	36221 37220 37221 61635 76937	Maintain CCI Logic CPT Text/Definition CCI code pair similar code 36200
35002	33880 33883 33886	Maintain CCI Logic
35022	33880 33883 33886	Maintain CCI Logic
35081	36221	CCI code pair similar code 36200 CPT Text/Definition
35082	35647 36221	CCI code pairs similar codes 35646 36200 CPT Text/Definition
35091	36221	CCI code pair similar code 36200 CPT Text/Definition
35092	35091 36221	CCI code pair similar code 36200 NCCI Policy Chapter I H
35102	35647 36221	CCI code pairs similar codes 35646 36200 CPT Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
35103	35102 36221	Maintain CCI Logic CPT Text/Definition CCI code pair similar code 36200
35111	36221	CCI code pair similar code 36200
35112	36221	CCI code pair similar code 36200
35121	36221	CCI code pair similar code 36200
35122	36221	CCI code pair similar code 36200
35131	35647 36221	CCI code pairs similar codes 35646 36200 CPT Text/Definition
35132	35131 36221	NCCI Policy Manual 2021 Chapter I H CCI code pair similar code 36200
35141	36221	CCI code pair similar code 36200
35142	36221	CCI code pair similar code 36200
35216	36221	CCI code pair similar code 36200

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
35301	36222 36223 36224 36225 36226	CCI code pair similar code 36215
35331	36221	CCI code pair similar code 36200
35341	36221	CCI code pair similar code 36200
35351	36221	CCI code pair similar code 36200
35355	36221	CCI code pair similar code 36200
35361	36221	CCI code pair similar code 36200
35363	36221	CCI code pair similar code 36200
35452	35472	Maintain CCI Logic Open vs Percutaneous
35458	35475	Maintain CCI Logic Open vs Percutaneous
35460	35476	Maintain CCI Logic Open vs Percutaneous
35470	76000	NCCI Policy Manual 2021 Chapter XI I
35501	35525	NCCI Policy Manual 2021 Chapter V D

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
35506	35525	NCCI Policy Manual 2021 Chapter V D
35508	35525	NCCI Policy Manual 2021 Chapter V D
35509	35525	NCCI Policy Manual 2021 Chapter V D
35510	35301 35515 35526 35531 35533 35536 35537 35538 35539 35540 35560 35566 35585 35587 76881 76882 76998 93970 93971	NCCI Policy Manual 2021 Chapter V D
35511	35510 35525	NCCI Policy Manual 2021 Chapter V D
35512	35301 35311 35501 35506 35508 35509 35531 35533 35536 35537 35538 35539 35540 35556 35560 35566 35571 35583 35585 35587 76881 76882 76998 93970 93971	NCCI Policy Manual 2021 Chapter V D
35522	35321 35501 35506 35508 35509 35511 35515 35526 35531 35536 35537 35538 35539 35540 35556 35560 35566 35571 35583 35585 35587 76881 76882 76998 93970 93971	NCCI Policy Manual 2021 Chapter V D
35525	35321 35515 35516 35518 35521 35526 35531 35533 35536 35537 35538 35539 35540 35556 35560 35566 35571 35583 35585 35587 36838 76881 76882 76998 93970 93971	NCCI Policy Manual 2021 Chapter V D
35566	36221 36222 36223 36224 36225 36226	CCI code pair similar codes 36200 36215
35606	33889	Maintain CCI Logic
35642	35601	NCCI Policy Manual 2021 Chapter I H+L
35646	35647	NCCI Policy Manual 2021 Chapter I H+L
35647	35331 35371 49000 49002	NCCI Policy Manual 2021 Chapter I H+L

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
35665	35661 35663	NCCI Policy Manual 2021 Chapter I H+L
35875	37184	CPT Text/Definition
35876	37184	CPT Text/Definition
36002	96379	CPT Text/Definition
36215	G0269	NCCI Policy Manual 2021 Chapter V D CPT/HCPCS Text/Definition
36216	G0269	CPT/HCPCS Text/Definition
36217	G0269	CPT/HCPCS Text/Definition
36218	G0269	CPT/HCPCS Text/Definition
36245	36221 G0269	CCI code pair similar code 36200 CPT/HCPCS Text/Definition
36246	36221 G0269	CCI code pair similar code 36200 CPT/HCPCS Text/Definition
36247	36221 G0269	CCI code pair similar code 36200 CPT/HCPCS Text/Definition
36248	36221 G0269	CCI code pair similar code 36200 CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
36251	36221	CCI code pair similar code 36200
36252	36221	CCI code pair similar code 36200
36253	36221	CCI code pair similar code 36200
36254	36221	CCI code pair similar code 36200
36415	36410	Maintain CCI Logic
36416	36591	CCI edits for 36415 + 36540 CPT Text Definition
36468	76942 76998 93970 93971 S2202	NCCI Policy Manual 2021 Chapter I H+L CPT/HCPCS Text/Definition
36470	36468 76998 93970 93971 J3490 J3590 S2202	NCCI Policy Manual 2021 Chapter I H+L CPT/HCPCS Text/Definition
36471	36468 76998 93970 93971 J3490 J3590 S2202	NCCI Policy Manual 2021 Chapter I H+L CPT/HCPCS Text/Definition
36475	37700 37718 37722 37735 S2202	Maintain CCI Logic CPT Text/Definition
36478	37700 37718 37722 37735 S2202	NCCI Policy Manual 2021 Chapter I C CPT Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
36555	36014 36015	NCCI Policy Manual 2021 Chapter I C CPT Text/Definition
36556	36014 36015	Maintain CCI Logic CPT Text/Definition
36557	36014 36015 96522	Maintain CCI Logic CPT Text/Definition
36558	36014 36015 96522	Maintain CCI Logic CPT Text/Definition
36560	36002 36014 36015	Maintain CCI Logic CPT Text/Definition
36561	36002 36014 36015	Maintain CCI Logic CPT Text/Definition
36563	36575 36576 36578 36590	Maintain CCI Logic CPT Text/Definition
36565	35800 35840 35860 36002 36010 36014 36015 96522	Maintain CCI Logic CPT Text/Definition
36566	36002 36014 36015	Maintain CCI Logic CPT Text/Definition
36568	36014 36015	Maintain CCI Logic CPT Text/Definition
36569	36014 36015	NCCI Policy Manual 2021 Chapter 1 C CPT Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
36570	36002 36014 36015	Maintain CCI Logic Text/Definition CPT
36571	36002 36014 36015	Maintain CCI Logic Text/Definition CPT
36581	36002 36014 36015	Maintain CCI Logic Text/Definition CPT
36584	36002 36014 36015	Maintain CCI Logic Text/Definition CPT
36589	35860 36555 36580	Maintain CCI Logic Text/Definition CPT
36591	96360	Maintain CCI Logic Text/Definition CPT
36831	36595 36596	Maintain CCI Logic Text/Definition CPT
36833	36595 36596	Maintain CCI Logic Text/Definition CPT
36838	35207 35236 35266 35860 36819 36820 36821 36825 36830 36835 37211 37212 37213 37214	CPT Text/Definition CCI code pair similar code 37201
36860	36595 36596	Maintain CCI Logic Text/Definition CPT
36861	36595 36596	Maintain CCI Logic Text/Definition CPT
37145	37182 37183	Maintain CCI Logic Open vs Percutaneous

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
37160	37182 37183	Maintain CCI Logic Open vs Percutaneous
37180	37182 37183	Maintain CCI Logic Open vs Percutaneous
37181	37182 37183	Maintain CCI Logic Open vs Percutaneous
37182	34813 36620 36625 37206 37208 61635	CCI code pairs similar code 37205
37183	34813 36620 36625 37206 37208 61635	CCI code pairs similar code 37205
37211	37182 37183 37205 37206 61635 76003 76360 76393 76986 90760 90765 70772 90774 90775 90780 C8950 C8952 G0345 G0347 G0351 G0353 G0354	CCI code pair similar code 37201
37212	37182 37183 37205 37206 61635 76003 76360 76393 76986 90760 90765 70772 90774 90775 90780 C8950 C8952 G0345 G0347 G0351 G0353 G0354	CCI code pair similar code 37201
37213	37182 37183 37205 37206 61635 76003 76360 76393 76986 90760 90765 70772 90774 90775 90780 C8950 C8952 G0345 G0347 G0351 G0353 G0354	CCI code pair similar code 37201
37214	37182 37183 37205 37206 61635 76003 76360 76393 76986 90760 90765 70772 90774 90775 90780 C8950 C8952 G0345 G0347 G0351 G0353 G0354	CCI code pair similar code 37201
37215	36221 36225 36226	CCI code pair similar codes 36000 36215
37216	61635	Maintain CCI Logic

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
37220	36221 36248	NCCI Policy Manual 2021 Chapter X D Chapter V D Open vs Percutaneous CCI code pair similar code 36200
37221	36221 36248	NCCI Policy Manual 2021 Chapter X D Chapter V D Open vs Percutaneous CCI code pair similar code 36200
37224	36221 36248	NCCI Policy Manual 2021 Chapter X D Chapter V D Open vs Percutaneous CCI code pair similar code 36200
37225	36221 36248	NCCI Policy Manual 2021 Chapter X D Chapter V D Open vs Percutaneous CCI code pair similar code 36200
37226	36221 36248	NCCI Policy Manual 2021 Chapter X D Chapter V D Open vs Percutaneous CCI code pair similar code 36200

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
37227	36221 36248	NCCI Policy Manual 2021 Chapter X D Chapter V D Open vs Percutaneous CCI code pair similar code 36200
37228	36221 36248	NCCI Policy Manual 2021 Chapter X D Chapter V D Open vs Percutaneous CCI code pair similar code 36200
37229	36221 36248	NCCI Policy Manual 2021 Chapter X D Chapter V D Open vs Percutaneous CCI code pair similar code 36200
37230	36221 36248	NCCI Policy Manual 2021 Chapter X D Chapter V D Open vs Percutaneous CCI code pair similar code 36200
37231	36221 36248	NCCI Policy Manual 2021 Chapter X D Chapter V D Open vs Percutaneous CCI code pair similar code 36200

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
37500	S2202	CPT/HCPCS Text/Definition
37600	61630	Maintain CCI Logic
37605	61630	Maintain CCI Logic
37606	37605	Maintain CCI Logic NCCI Policy Chapter I H
37718	S2202	CPT/HCPCS Text/Definition
37722	S2202	CPT/HCPCS Text/Definition
37735	S2202	NCCI Policy Manual 2021 Chapter I L C8 + 9 Open vs Endoscopic
37760	S2202	NCCI Policy Manual 2021 Chapter I L C8 + 9 Open vs Endoscopic
37765	37735 37780 S2202	NCCI Policy Manual 2021 Chapter I C 10 CPT/HCPCS Text/Definition
37766	37735 37780 S2202	Maintain CCI Logic CPT/HCPCS Text/Definition
37785	S2202	NCCI Policy Manual 2021 Chapter I L C8 + 9 Open vs Endoscopic
38101	38100	NCCI Policy Manual 2021 Chapter I C + H
38205	S2140	CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
38206	S2140	CPT/HCPCS Text/Definition
38209	38208	Maintain CCI Logic NCCI Policy Chapter I H5 CPT Text/Definition
38240	S2142	CPT/HCPCS Text/Definition
38242	38220 38221	NCCI Policy Manual 2021 Chapter V E
38500	10030 45395 45397	NCCI Policy Manual 2021 Chapter I C8+9 Open vs Laparoscopic
38505	10030	NCCI Policy Manual 2021 Chapter I C 7
38510	10030	NCCI Policy Manual 2021 Chapter I C 7
38520	10030	NCCI Policy Manual 2021 Chapter I C 7
38525	10030	NCCI Policy Manual 2021 Chapter I C 7
38530	10030	NCCI Policy Manual 2021 Chapter I C 7
38562	38570	NCCI Policy Manual 2021 Chapter I C8+9 Open vs Laparoscopic

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
38571	38562 38570	NCCI Policy Manual 2021 Chapter I C8+9 Open vs Laparoscopic
39200	10030	NCCI Policy Manual 2021 Chapter 1 C7
39560	44180	NCCI Policy Manual 2021 Chapter VI E 9
39561	44180	NCCI Policy Manual 2021 Chapter VI E 9
40490	10030	NCCI Policy Manual 2021 Chapter 1 C7
40804	40800	NCCI Policy Manual 2021 Chapter I L
40805	40800	NCCI Policy Manual 2021 Chapter I L
40808	10030	NCCI Policy Manual 2021 Chapter 1 C7
40818	40808	NCCI Policy Manual 2021 Chapter I C
40844	40840	NCCI Policy Manual 2021 Chapter I H + L
40490	10030	NCCI Policy Manual 2021 Chapter 1 C7
40808	10030	NCCI Policy Manual 2021 Chapter 1 C7

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
41100	10030	NCCI Policy Manual 2021 Chapter 1 C7
41116	41108	NCCI Policy Manual 2021 Chapter I C
41120	41100 41105 41108 41110 41112 41113 41114	NCCI Policy Manual 2021 Chapter I L + M
41130	41100 41105 41108 41110 41112 41113 41114	NCCI Policy Manual 2021 Chapter I L + M
41135	41100 41105 41108 41110 41112 41113 41114	NCCI Policy Manual 2021 Chapter I L + M
41140	41100 41105 41108 41110 41112 41113 41114	NCCI Policy Manual 2021 Chapter I L + M
41145	41100 41105 41108 41110 41112 41113 41114	NCCI Policy Manual 2021 Chapter I L + M
41150	41100 41105 41108 41110 41112 41113 41114 41116	NCCI Policy Manual 2021 Chapter I C + L + M
41520	40819	NCCI Policy Manual 2021 Chapter I L + M
41826	41805 41806	NCCI Policy Manual 2021 Chapter I L + M
41827	41805 41806	NCCI Policy Manual 2021 Chapter I L + M
41830	41805 41806	NCCI Policy Manual 2021 Chapter I L + M

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
42100	10030 42000	NCCI Policy Manual 2021 Chapter I C
42106	42001 42100	NCCI Policy Manual 2021 Chapter I C Chapter VI H
42107	42001 42100	NCCI Policy Manual 2021 Chapter I C Chapter VI H
42220	42200	NCCI Policy Manual 2021 Chapter I L + M
42225	42200	NCCI Policy Manual 2021 Chapter I L + M
42226	42220	NCCI Policy Manual 2021 Chapter I L + M
42227	42226	NCCI Policy Manual 2021 Chapter I L + M
42400	10030	NCCI Policy Manual 2021 Chapter 1 C7
42405	10030	NCCI Policy Manual 2021 Chapter 1 C7
42408	42400 42405	NCCI Policy Manual 2021 Chapter I L + M
42409	42408	NCCI Policy Manual 2021 Chapter I H + L

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
42425	42410 42415 42420	NCCI Policy Manual 2021 Chapter I H + L
42505	42500	NCCI Policy Manual 2021 Chapter I L
42720	42700	NCCI Policy Manual 2021 Chapter I H + L
42725	42700	NCCI Policy Manual 2021 Chapter I H + L
42800	10030	NCCI Policy Manual 2021 Chapter 1 C7
42802	10030	NCCI Policy Manual 2021 Chapter 1 C7
42804	10030	NCCI Policy Manual 2021 Chapter 1 C7
42806	10030	NCCI Policy Manual 2021 Chapter 1 C7
42870	42860	NCCI Policy Manual 2021 Chapter I H + L
42890	42950	NCCI Policy Manual 2021 Chapter I H + L
42892	42890 42950	NCCI Policy Manual 2021 Chapter I H + L
42894	42890 42950	NCCI Policy Manual 2021 Chapter I H + L

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
42953	42900 42950	NCCI Policy Manual 2021 Chapter I H + L
42961	42960	NCCI Policy Manual 2021 Chapter I H + L
42962	42961	NCCI Policy Manual 2021 Chapter I H + L
42971	42970	NCCI Policy Manual 2021 Chapter I H + L
42972	42970 42971	NCCI Policy Manual 2021 Chapter I H + L
43045	43020	NCCI Policy Manual 2021 Chapter I C
43100	43020	NCCI Policy Manual 2021 Chapter I C
43101	43045	NCCI Policy Manual 2021 Chapter I C
43107	43020 43122	NCCI Policy Manual 2021 Chapter I C
43108	43020	NCCI Policy Manual 2021 Chapter I C
43112	43045 43107	NCCI Policy Manual 2021 Chapter I C
43113	43045 43107	NCCI Policy Manual 2021 Chapter I C

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
43116	43020	NCCI Policy Manual 2021 Chapter I C
43117	43045 43122	NCCI Policy Manual 2021 Chapter I C
43118	43107 43121 43122	NCCI Policy Manual 2021 Chapter I C + H
43121	43107	NCCI Policy Manual 2021 Chapter I H
43123	43107 43117 43118 43121 43122	NCCI Policy Manual 2021 Chapter I C + H
43135	43130	NCCI Policy Manual 2021 Chapter I C
43200	43754 43755	NCCI Policy Manual 2021 Chapter VI C
43202	43204 43205 43215 43220 43226	NCCI Policy Manual 2021 Chapter I H Chapter VI C
43204	43215 43216 43217 43220 43226	NCCI Policy Manual 2021 Chapter I H Chapter VI C
43205	43215 43216 43217 43220 43226	NCCI Policy Manual 2021 Chapter I H Chapter VI C
43206	0213T 0216T 36005 36010 36011 36012 36013 36014 36015 36405 36406 36420 36425 36430 36440 36600 36640 43260 43752 64490 64493 64505 64510 64517 64520 64530 93000 93005 93010 93040 93041 93042 93318 94002 94200 94680 94681 94690 95812 95813 95816 95819 95822 95829 95955 96360 96365 96372 96374 96375 96376	CCI code pairs similar code 43200

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
43215	43216 43220 43226	NCCI Policy Manual 2021 Chapter I H Chapter VI C
43216	43220 43226	NCCI Policy Manual 2021 Chapter I H Chapter VI C
43217	43215 43220 43226	NCCI Policy Manual 2021 Chapter I H Chapter VI C
43232	10030	NCCI Policy Manual 2021 Chapter 1 C 7
43237	10030 43245 43249	Maintain CCI Logic CPT Text/Definition
43238	10030 43245 43249	Maintain CCI Logic CPT Text/Definition
43239	43241 43244 43246 43247	NCCI Policy Manual 2021 Chapter I H Chapter VI C
43240	10030 43260 43261	NCCI Policy Manual 2021 Chapter I H Chapter VI C
43242	10030 43240 43241 43243 43244 43246 43247 43249 43250	NCCI Policy Manual 2021 Chapter I H Chapter VI C CCI code pairs similar code 43204
43244	43241 43247 43249 43250 43251	NCCI Policy Manual 2021 Chapter I H Chapter VI C CCI code pairs similar code 43204

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
43245	43239 43241 43242 43244 43246 43247 43249 43250 43251	NCCI Policy Manual 2021 Chapter I H Chapter VI C CCI code pairs similar code 43204
43246	43249 43250 43251	NCCI Policy Manual 2021 Chapter I H Chapter VI C CCI code pairs similar code 43204
43247	43237 43238 43241 43249 43250	NCCI Policy Manual 2021 Chapter I H Chapter VI C CCI code pairs similar code 43204
43249	43241 43248	NCCI Policy Manual 2021 Chapter I H Chapter VI C CCI code pairs similar code 43204
43250	43237 43238 43241 43249	NCCI Policy Manual 2021 Chapter I H Chapter VI C CCI code pairs similar code 43204
43251	43237 43238 43241 43247 43249	NCCI Policy Manual 2021 Chapter I H Chapter VI C CCI code pairs similar code 43204

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
43252	0216T 36405 36406 36420 36425 36430 36440 36600 36640 43260 43752 43762 43763 43830 64490 64493 64505 64510 64517 64520 64530 93000 93005 93010 93040 93041 93042 93318 94002 94200 94680 94681 94690 95812 95813 95816 95819 95822 95829 95955 96360 96365 96372 96374 96375 96376	CCI code pairs similar code 43235
43255	43249	NCCI Policy Manual 2021 Chapter I H Chapter VI C CCI code pairs similar code 43204
43259	43241 43243 43246 43247 43249 43250 43251	NCCI Policy Manual 2021 Chapter I H Chapter VI C CCI code pairs similar code 43204
43262	43240 43261 43263	NCCI Policy Manual 2021 Chapter I H Chapter VI C
43263	43261	NCCI Policy Manual 2021 Chapter I H Chapter VI C
43264	43240 43261 43263 43267 43268	NCCI Policy Manual 2021 Chapter I H Chapter VI C
43265	43240 43261 43263 43267 43268	NCCI Policy Manual 2021 Chapter I H Chapter VI C
43267	43240 43261 43263	NCCI Policy Manual 2021 Chapter I H Chapter VI C
43268	43240 43261 43263	NCCI Policy Manual 2021 Chapter I H Chapter VI C

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
43279	43281 43282	CPT Text/Definition Integral/Incident To
43289	43235	CPT Text/Definition Integral/Incident To
43310	43305	NCCI Policy Manual 2021 Chapter I H
43312	43300	NCCI Policy Manual 2021 Chapter I H
43313	43201	CCI code pairs similar codes 43310 + 43204
43314	43201 43360 43361	CCI code pairs similar codes 43310 + 43204
43325	91020	NCCI Policy Manual 2021 Chapter I J Chapter VI C
43326	91020	NCCI Policy Manual 2021 Chapter I J Chapter VI C
43327	91020	NCCI Policy Manual 2021 Chapter I J Chapter VI C
43328	91020	NCCI Policy Manual 2021 Chapter I J Chapter VI C
43331	49320	NCCI Policy Manual 2021 Chapter VI E
43332	91020	NCCI Policy Manual 2021 Chapter I J

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
43333	91020	NCCI Policy Manual 2021 Chapter I J
43334	49320	NCCI Policy Manual 2021 Chapter I J
43335	43327 49320	NCCI Policy Manual 2021 Chapter I J
43336	49320	NCCI Policy Manual 2021 Chapter I J
43337	49320	NCCI Policy Manual 2021 Chapter I J
43341	49320	NCCI Policy Manual 2021 Chapter VI E
43351	43352 44180 49320	NCCI Policy Manual 2021 Chapter I J Chapter VI F
43352	44180 49320	NCCI Policy Manual 2021 Chapter VI E
43361	43360	NCCI Policy Manual 2021 Chapter I J + L
43400	49320	NCCI Policy Manual 2021 Chapter VI E
43401	49320	NCCI Policy Manual 2021 Chapter VI E
43415	43410	NCCI Policy Manual 2021 Chapter I J + L

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
43425	43420	NCCI Policy Manual 2021 Chapter I J + L
43496	44180 49320	NCCI Policy Manual 2021 Chapter VI E
43605	10030	NCCI Policy Manual 2021 Chapter 1 C7
43611	43605	NCCI Policy Manual 2021 Chapter I J + L
43620	43500	NCCI Policy Manual Chapter I C + H CCI code pairs similar codes 43204 + 43243
43621	43500	NCCI Policy Manual Chapter I C + H CCI code pairs similar codes 43204 + 43243
43622	43500	NCCI Policy Manual Chapter I C + H CCI code pairs similar codes 43204 + 43243
43631	43236	NCCI Policy Manual Chapter I C + H CCI code pairs similar codes 43204 + 43243

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
43632	43500	NCCI Policy Manual 2021 Chapter I C + H CCI code pairs similar code 43204
43633	43500	NCCI Policy Manual 2021 Chapter I C + H CCI code pairs similar code 43204
43634	43500	NCCI Policy Manual 2021 Chapter I C + H CCI code pairs similar code 43204
43640	43653	NCCI Policy Manual 2021 Chapter I C + H CCI code pairs similar codes 43204 + 43243
43641	43653	NCCI Policy Manual 2021 Chapter I C + H CCI code pairs similar codes 43204 + 43243
43644	43200 43201 43202 43204 43205 43215 43216 43217 43220 43226 43227 43231 43232 43236 43237 43238 43239 43240 43241 43242 43243 43244 43245 43246 43247 43248 43249 43250 43251 43255 43259 43281 43282 43770 43771 43772 43773 43774 43830 43840 43886 43887 43888 44010 44820 44850 49000 49002 49010 49255 49570 S2083	NCCI Integral/Incident To CPT Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
43645	43200 43201 43202 43204 43205 43215 43216 43217 43220 43226 43227 43231 43232 43236 43237 43238 43239 43240 43241 43242 43243 43244 43245 43246 43247 43248 43249 43250 43251 43255 43259 43281 43282 43770 43771 43772 43773 43774 43830 43840 43886 43887 43888 44010 44820 44850 49000 49002 49010 49255 49570 S2083	NCCI Integral/Incident To CPT Text/Definition
43770	43200 43201 43202 43204 43205 43215 43216 43217 43220 43226 43227 43231 43232 43235 43236 43237 43239 43240 43241 43242 43243 43244 43245 43246 43247 43248 43249 43250 43251 43255 43259 43830 44010 44820 44850 49000 49002 49010 49255 49321 49322 49323 49570 S2083	NCCI Integral/Incident To CPT Text/Definition
43771	43200 43201 43202 43204 43205 43215 43216 43217 43220 43226 43227 43231 43232 43235 43236 43237 43239 43240 43241 43242 43243 43244 43245 43246 43247 43248 43249 43250 43251 43255 43259 43659 43830 44010 44820 44850 49000 49002 49010 49255 49321 49322 49323 49570 S2083	NCCI Integral/Incident To CPT Text/Definition
43772	43200 43201 43202 43204 43205 43215 43216 43217 43220 43226 43227 43231 43232 43235 43236 43237 43239 43240 43241 43242 43243 43244 43245 43246 43247 43248 43249 43250 43251 43255 43259 43281 43282 43659 43830 44010 44820 44850 49000 49002 49010 49255 49321 49322 49323 49570 S2083	NCCI Integral/Incident To CPT Text/Definition
43773	43200 43201 43202 43204 43205 43215 43216 43217 43220 43226 43227 43231 43232 43235 43236 43237 43239 43240 43241 43242 43243 43244 43245 43246 43247 43248 43249 43250 43251 43255 43259 43659 43830 44010 44820 44850 49000 49002 49010 49255 49321 49322 49323 49570 S2083	NCCI Integral/Incident To CPT Text/Definition
43774	43200 43201 43202 43204 43205 43215 43216 43217 43220 43226 43227 43231 43232 43235 43236 43237 43239 43240 43241 43242 43243 43244 43245 43246 43247 43248 43249 43250 43251 43255 43259 43280 43659 43830 44010 44820 44850 49000 49002 49010 49255 49321 49322 49323 49570 S2083	NCCI Integral/Incident To CPT Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
43775	43235 43281 43282 43774	NCCI Integral/Incident To CPT Text/Definition
43825	64755 64760	NCCI Policy Manual 2021 Chapter I C Chapter VI E CCI code pairs similar codes 43204+ 43243
43832	43831	NCCI Policy Manual 2021 Chapter I C + H
43842	43770 43771 43772 43773 43774 43840 43886 43887 43888 49320	NCCI Policy Manual 2021 Chapter I C + H
43843	43840 43886 43887 43888	NCCI Policy Manual 2021 Chapter I C + H
43845	43200 43201 43202 43204 43205 43215 43216 43217 43220 43226 43227 43231 43232 43236 43237 43238 43239 43240 43241 43242 43243 43244 43245 43246 43247 43248 43249 43250 43251 43255 43259 43840 43842 43843 43886 43887 43888 44010 44180 S2083	NCCI Policy Manual 2021 Chapter I C + J Chapter VI F
43846	43840 43886 43887 43888	NCCI Policy Manual 2021 Chapter I C + H CCI code pairs similar codes 43204 + 43243
43847	43840 43842 43843 43886 43887 43888	NCCI Policy Manual 2021 Chapter I C + H CCI code pairs similar codes 43204 + 43243
43848	43840	Maintain CCI Logic NCCI Policy Chapter I C9

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
43855	64755 64760	NCCI Policy Manual 2021 Chapter I C Chapter VI E CCI code pairs similar codes 43204+ 43243
43860	43201 43236	NCCI Policy Manual 2021 Chapter I C + H CCI code pairs similar codes 43204 + 43243
43865	64755 64760	NCCI Policy Manual 2021 Chapter I C+ H Chapter VI E CCI code pairs similar codes 43204 + 43243
43886	43231 43232 43238 43240 43242 43770 43771 43772 43773 43830 43831 43832 44180 44820 44850 44950 44970 49000 49002 49010 49255 49320 49321 49322 49323 49570	NCCI Policy Manual 2021 Chapter I C + J Chapter VI F
43887	43231 43232 43238 43240 43242 43770 43771 43773 43830 43831 43832 44180 44820 44850 44950 44970 49000 49002 49010 49255 49320 49321 49322 49323 49570	NCCI Policy Manual 2021 Chapter I C + J Chapter VI F
43888	43231 43232 43238 43240 43242 43770 43771 43772 43830 43831 43832 44180 44820 44850 44950 44970 49000 49002 49010 49255 49320 49321 49322 49323 49570	NCCI Policy Manual 2021 Chapter I C + J Chapter VI F
44015	44180 44187 49320	NCCI Policy Manual 2021 Chapter I C + J Chapter VI F

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
44021	44020 44188	NCCI Policy Manual 2021 Chapter I C + H
44050	49320	NCCI Policy Manual 2021 Chapter I J
44100	10030 44180 49320	NCCI Policy Manual 2021 Chapter I J Chapter VI F
44110	44100	NCCI Policy Manual 2021 Chapter I C + M
44111	44100	NCCI Policy Manual 2021 Chapter I C + M
44120	44188	NCCI Policy Manual 2021 Chapter I C + M
44125	44120 44188 44227	NCCI Policy Manual 2021 Chapter I C + H
44126	38500 44188 44227	NCCI Policy Manual 2021 Chapter I C CCI code pairs similar code 44120
44127	38500 44188 44227	NCCI Policy Manual 2021 Chapter I C CCI code pairs similar code 44120
44130	44188 44202 44227	Maintain CCI Logic NCCI Policy Chapter IC Open vs Laparoscopic

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
44132	49320 50300 50320	NCCI Policy Manual 2021 Chapter I C + L + M
44133	44132 49320 50300 50320	NCCI Policy Manual 2021 Chapter I C + L + M
44135	44136 49320 S2053	NCCI Policy Manual 2021 Chapter I C + H + M
44136	49320 S2053	NCCI Policy Manual 2021 Chapter I C + H + M
44137	44121	CPT Text/Definition
44139	44213	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
44140	44188 45381 45386	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
44141	45381 45386	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
44143	45381 45386	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
44144	44202 45381 45397	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
44145	44188 45381 45386	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
44146	45381 45386	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
44147	44188 45381 45386	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
44150	44188 45381 45386	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
44151	44188 45381 45386	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
44155	44188 44800 45381 45386	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
44156	44188 45381 45386	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
44160	44188 45381 45386	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
44186	43246 49321 49322 49323 69990	Maintain CCI Logic

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
44187	43246 44345 44388 44701 45300 49321 49322 49323	Maintain CCI Logic
44188	43246 44186 44388 44701 45300 49321 49322 49323	Maintain CCI Logic CPT Text/Definition
44204	44186 44187 44188 44202	NCCI Policy Manual 2021 Chapter I H + J
44205	44186 44187 44188	NCCI Policy Manual 2021 Chapter I H + J
44206	44186 44187 44202 44320 44322 44340 44345 44346	NCCI Policy Manual 2021 Chapter I C
44207	44186 44187 44188 44202 44320 44322 44340 44345 44346	NCCI Policy Manual 2021 Chapter I C
44208	44186 44187 44202 44320 44322 44340 44345 44346	NCCI Policy Manual 2021 Chapter I C
44210	44186 44188 44202 44320 44322 44340 44345 44346	NCCI Policy Manual 2021 Chapter I C
44211	44186 44188 44202 44320 44322 44340 44345 44346	NCCI Policy Manual 2021 Chapter I C
44212	44186 44188 44202 44320 44322 44340 44345 44346	NCCI Policy Manual 2021 Chapter I C
44227	44701 45300 49321 49322 49323	Maintain CCI Logic
44238	44180 49320	NCCI Policy Manual 2021 Chapter I J Chapter VI F
44300	44186	NCCI Policy Manual 2021 Chapter I C

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
44310	44312 44314 49320	NCCI Policy Manual 2021 Chapter I C + J + L
44314	44312	NCCI Policy Manual 2021 Chapter I C + J + L
44316	44310 44312 44314	NCCI Policy Manual 2021 Chapter I C + J + L
44320	44322 44340 44345 44346	NCCI Policy Manual 2021 Chapter I C + J + L
44322	44340 44345 44346	NCCI Policy Manual 2021 Chapter I C + J + L
44340	45395 45397	NCCI Policy Manual 2021 Chapter I C
44345	44340 45395 45397	NCCI Policy Manual 2021 Chapter I C + J + L
44346	44340 44345	NCCI Policy Manual 2021 Chapter I C + J + L
44363	44361	NCCI Policy Manual 2021 Chapter I H Chapter VI C
44364	44363 44370 44373	NCCI Policy Manual 2021 Chapter I H Chapter VI C
44365	44363	NCCI Policy Manual 2021 Chapter I H Chapter VI C
44369	44361 44363 44370 44372 44373	NCCI Policy Manual 2021 Chapter I H Chapter VI C

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
44370	44361 44363 44365 44373	NCCI Policy Manual 2021 Chapter I H Chapter VI C
44372	44361 44363 44364 44365	NCCI Policy Manual 2021 Chapter I H Chapter VI C
44373	44361 44363 44365	NCCI Policy Manual 2021 Chapter I H Chapter VI C
44379	44377 44384	NCCI Policy Manual 2021 Chapter I H Chapter VI C
44389	44402	NCCI Policy Manual 2021 Chapter I H Chapter VI C
44390	44389 44402	NCCI Policy Manual 2021 Chapter I H Chapter VI C
44392	44390 44402	NCCI Policy Manual 2021 Chapter I H Chapter VI C
44394	44390 44402	NCCI Policy Manual 2021 Chapter I H Chapter VI C
44401	44389 44390 44402	NCCI Policy Manual 2021 Chapter I H Chapter VI C
44402	44384	NCCI Policy Manual 2021 Chapter I H Chapter VI C
44620	45395 45397	NCCI Policy Manual 2021 Chapter I C
44625	45395 45397	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
44661	45381 45386	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
44799	44188 44227 45381 45386 45395 45397 49320	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
44820	45395 45397	NCCI Policy Manual 2021 Chapter I C
44850	45395 45397	NCCI Policy Manual 2021 Chapter I C
44950	00840 44180 44955 49320	NCCI Policy Manual Chapter I J Chapter VI F
44960	44955	NCCI Policy Manual 2021 Chapter I C + H
45020	45000	Maintain CCI Logic CPT Text/Definition
45100	10030	NCCI Policy Manual 2021 Chapter 1 C7
45110	45400 45402	NCCI Policy Manual 2021 Chapter I C + H
45126	45400 45402	NCCI Policy Manual 2021 Chapter I C
45130	44180	NCCI Policy Manual 2021 Chapter VI F

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
45135	45395 45397	NCCI Policy Manual 2021 Chapter I C
45171	45395 45397	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
45172	45395 45397	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
45190	45395 45397	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
45300	G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition
45303	G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition
45305	45303 45327 G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition
45307	45305 45308 45321 45327 G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
45308	45303 45321 G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition
45309	45303 45307 45321 45327 G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition
45315	45303 45307 45321 45327 G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition
45317	G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition
45320	45303 45305 45307 45321 45327 G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition
45321	G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition
45327	45308 45321 G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition
45330	G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
45331	G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition
45332	45331 45333 45337 45347 G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition
45333	45337 45347 G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition
45334	G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition
45335	36005 36010 36011 36012 36013 36014 36015 G0106	Maintain CCI Logic CPT/HCPCS Text/Definition
45337	45331 G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition
45338	45332 45337 45347 G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition
45340	36005 36010 36011 36012 36013 36014 36015 G0106	Maintain CCI Logic CPT Text/Definition
45341	10030 G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
45342	10030 G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition
45346	45331 45332 45337 45347 G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition
45347	45335 45337 G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition
45378	G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition
45379	45380 45381 45389 G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition
45380	45381 45389 G0106	NCCI Policy Manual 2021 Chapter I H Chapter VI H
45381	36005 36010 36011 36012 36013 36014 36015	Maintain CCI Logic CPT Text/Definition
45382	G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition
45384	45379 45381 45389 G0106	NCCI Policy Manual 2021 Chapter I H Chapter VI H

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
45385	45379 45381 45389 G0106	NCCI Policy Manual 2021 Chapter I H Chapter VI H
45386	36005 36010 36011 36012 36013 36014 36015 45379 45380 45384 45385 45388 G0106	Maintain CCI Logic CPT Text/Definition
45388	45379 45380 45381 45389 G0106	NCCI Policy Manual 2021 Chapter I H CPT/HCPCS Text/Definition
45389	G0106	NCCI Policy Manual 2021 Chapter I C + H CPT/HCPCS Text/Definition
45391	44701 45386 93976 G0106	Maintain CCI Logic CPT Text/Definition
45392	10030 44701 45386 77012 93976 G0106	Maintain CCI Logic CPT Text/Definition
45395	44701 45300 49322 49323	Maintain CCI Logic CPT Text/Definition
45397	44701 45300 49322 49323	Maintain CCI Logic CPT Text/Definition
45400	44701 44820 44850 45300 45900 45905 45910 45915 46940 46942 49321 49322 49323	Maintain CCI Logic CPT Text/Definition
45402	44701 44820 44850 45900 45905 45910 45915 46940 46942 49321 49322 49323	Maintain CCI Logic CPT Text/Definition
45499	43752	CPT Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
45505	45395 45397	Maintain CCI Logic NCCI Policy Chapter I C8+9 Open vs Laparoscopic
45520	46500	Maintain CCI Logic CPT Text/Definition
45540	45395 45397	NCCI Policy Manual Chapter I C Open vs Laparoscopic
45541	44180 45395 45397	NCCI Policy Manual Chapter I C Open vs Laparoscopic
45562	45400 45402	NCCI Policy Manual Chapter I C Open vs Laparoscopic
45563	45400 45402	NCCI Policy Manual Chapter I C
45990	44180 44310 44320	Maintain CCI Logic
45999	45499 45990	NCCI Policy Manual Chapter I C Open vs Laparoscopic
46045	46050	Maintain CCI Logic CPT Text/Definition
46083	46221 46500	NCCI Policy Manual Chapter VI E

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
46200	45300 45395 45397	NCCI Policy Manual 2021 Chapter VI C
46220	44005 45395 45397	Maintain CCI Logic NCCI Policy Chapter I B
46221	44005 45395 45397 46320	NCCI Policy Manual 2021 Chapter VI C + G
46230	45300 45395 45397 46083 46320 46500 46945	NCCI Policy Manual 2021 Chapter VI C + G
46250	45300 45395 45397 46083 46230 46320 46500 46945 46946	NCCI Policy Manual 2021 Chapter VI C + G
46255	45300 45395 45397 46083 46230 46250 46320 46500 46945 46946	NCCI Policy Manual 2021 Chapter VI C + G
46257	45300 45395 45397 46083 46230 46250 46320 46500 46945 46946	NCCI Policy Manual 2021 Chapter VI C + G
46258	45300 45395 45397 46083 46230 46250 46257 46320 46500 46945 46946	NCCI Policy Manual 2021 Chapter VI C + G
46260	00400 45300 45395 45397 46083 46320 46500 46706	NCCI Policy Manual 2021 Chapter VI C + G
46261	45300 45395 45397 46083 46255 46320 46500 46706 46945 46946	NCCI Policy Manual 2021 Chapter VI C + G
46262	45300 45395 45397 46083 46255 46261 46320 46500 46945 46946	NCCI Policy Manual 2021 Chapter VI C + G
46270	45300 45395 45397	NCCI Policy Manual 2021 Chapter VI C

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
46275	45300 45395 45397	NCCI Policy Manual 2021 Chapter VI C
46280	45300 45395 45397 46050	NCCI Policy Manual 2021 Chapter VI C
46285	45300 45395 45397	NCCI Policy Manual 2021 Chapter VI C
46288	45300	NCCI Policy Manual 2021 Chapter VI C
46320	45300 46500	NCCI Policy Manual Chapter VI C + E
46500	45300	NCCI Policy Manual 2021 Chapter VI C
46505	45300 45990	NCCI Policy Manual 2021 Chapter VI C
46600	G0104 G0105 G0106	Maintain CCI Logic CPT/HCPCS Text/Definition
46604	46606 G0105 G0106	NCCI Policy Manual 2021 Chapter I H Chapter VI C CPT/HCPCS Text/Definition
46606	G0104 G0105 G0106	Maintain CCI Logic CPT/HCPCS Text/Definition
46608	46604 46606 46610 G0105 G0106	NCCI Policy Manual 2021 Chapter I H Chapter VI C CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
46610	46604 G0104 G0105 G0106	NCCI Policy Manual 2021 Chapter I H Chapter VI C CPT/HCPCS Text/Definition
46611	46604 46608 G0104 G0105 G0106	NCCI Policy Manual 2021 Chapter I H Chapter VI C CPT/HCPCS Text/Definition
46612	46604 46608 G0104 G0105 G0106	NCCI Policy Manual 2021 Chapter I H Chapter VI C CPT/HCPCS Text/Definition
46614	G0105 G0106	Maintain CCI Logic CPT/HCPCS Text/Definition
46615	46604 46608 G0104 G0105 G0106	NCCI Policy Manual 2021 Chapter I H Chapter VI C CPT/HCPCS Text/Definition
46710	46288	Maintain CCI Logic
46712	46288	Maintain CCI Logic
46715	46706 46710 46712	NCCI Policy Manual 2021 Chapter I C
46716	46706 46710 46712	NCCI Policy Manual 2021 Chapter I C
46730	46706 46710 46712	NCCI Policy Manual 2021 Chapter I C
46735	46706 46710 46712 49320	NCCI Policy Manual 2021 Chapter I C

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
46740	46706 46710 46712 46730	NCCI Policy Manual 2021 Chapter I C
46742	46706 46710 46712 46735 49320	NCCI Policy Manual 2021 Chapter I C
46744	46706	NCCI Policy Manual 2021 Chapter I C
46746	46706 46744 49320	NCCI Policy Manual 2021 Chapter I C
46748	46706 49320	NCCI Policy Manual 2021 Chapter I C
46910	46900 46916	NCCI Policy Manual 2021 Chapter I C + H
46916	46900	NCCI Policy Manual 2021 Chapter I C + H
46917	46900 46910 46916 46922	NCCI Policy Manual 2021 Chapter I C + H
46922	46900 46910 46916	NCCI Policy Manual 2021 Chapter I C + H
46924	46900 46910 46916 46917 46922	NCCI Policy Manual 2021 Chapter I C + H
46940	45395 45397	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
46942	45395 45397	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
46945	46083 46320 46500	NCCI Policy Manual 2021 Chapter VI G
46946	46083 46230 46320 46500	NCCI Policy Manual 2021 Chapter VI G
46947	45380 45381 45386 46083 46230 46320 46945 46946	Maintain CCI Logic
47000	10030	NCCI Policy Manual 2021 Chapter I C
47001	10030	NCCI Policy Manual 2021 Chapter I C
47133	44180	NCCI Policy Manual 2021 Chapter I J Chapter IV F
47360	47350	NCCI Policy Manual 2021 Chapter I C + L + M
47361	44180 49320	NCCI Policy Manual 2021 Chapter I J Chapter IV F
47362	44180 49320	NCCI Policy Manual 2021 Chapter I J Chapter IV F
47382	44180 49320	NCCI Policy Manual 2021 Chapter I J
47425	47460	NCCI Policy Manual 2021 Chapter I C

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
47533	47537	Maintain CCI Logic NCCI Policy Chapter I L
47534	47537	NCCI Policy Manual 2021 Chapter I L + M
47554	47553 47555 47556	Maintain CCI Logic NCCI Policy Chapter VI C
47555	47553	Maintain CCI Logic NCCI Policy Chapter VI C
47556	47553 47555	Maintain CCI Logic NCCI Policy Chapter VI C
47562	00790 74300 74301	NCCI Policy Manual 2021 Chapter I C Integral/Incident To
47563	49585	NCCI Policy Manual 2021 Chapter I C
47564	74300 74301	NCCI Policy Manual Integral/Incident To
47600	74300 74301	NCCI Policy Manual Integral/Incident To
48001	44187	Maintain CCI Logic NCCI Policy Chapter I C9
48100	10030	NCCI Policy Manual 2021 Chapter I C
48102	10030	NCCI Policy Manual 2021 Chapter I C

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
48140	48160 S2102	NCCI Policy Manual 2021 Chapter I C Chapter VI E CPT/HCPCS Text/Definition
48145	48160 S2102	NCCI Policy Manual 2021 Chapter I C Chapter VI E CPT/HCPCS Text/Definition
48146	48160 S2102	NCCI Policy Manual 2021 Chapter I C Chapter VI E CPT/HCPCS Text/Definition
48150	48160 S2102	NCCI Policy Manual 2021 Chapter I C Chapter VI E CPT/HCPCS Text/Definition
48153	48160 S2102	NCCI Policy Manual 2021 Chapter I C Chapter VI E CPT/HCPCS Text/Definition
48154	48160 S2102	NCCI Policy Manual 2021 Chapter I C Chapter VI E CPT/HCPCS Text/Definition
48155	48160 S2102	NCCI Policy Manual 2021 Chapter I C Chapter VI E CPT/HCPCS Text/Definition
48160	44180 48550 S2102	NCCI Policy Manual 2021 Chapter I C Chapter VI E CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
48550	44180 S2102	NCCI Policy Manual 2021 Chapter I B CPT/HCPCS Text/Definition
48554	44180	NCCI Policy Manual 2021 Chapter I B CPT/HCPCS Text/Definition
49000	10030 45395 45397 45400 45402 49320	NCCI Policy Manual Chapter I C Open vs Laparoscopic
49002	10030 45395 45397 45400 45402 49320	NCCI Policy Manual Chapter I C Open vs Laparoscopic
49010	0095T 0098T 10030 22856 22861 22864 45395 45397 45400 45402	NCCI Policy Manual Chapter I C Open vs Laparoscopic
49020	45395 45397	NCCI Policy Manual Chapter I C Open vs Laparoscopic
49040	45395 45397	NCCI Policy Manual Chapter I C Open vs Laparoscopic
49180	10030	NCCI Policy Manual 2018 Chapter 1 C9
49215	20982	NCCI Policy Manual 2018 Chapter I C 10 + 11

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
49255	45395 45397 45400 45402	NCCI Policy Manual Chapter I C vs Laparoscopic Open
49405	10030	NCCI Policy Manual 2021 Chapter 1 C
49406	10030	NCCI Policy Manual 2021 Chapter 1 C
49407	10030	NCCI Policy Manual 2021 Chapter 1 C
49418	44005 44180 44602 44603 44604 44605 44820 44850 49000 49002 49010 49255 49320 49321 49322 49329 49402 49436 49570	Same edits as 49419
49419	49321 49322 49329	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
49421	49321 49322 49329	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
49422	49321 49322 49329	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
49425	49423 49429	Maintain CCI Logic CPT Text/Definition
49426	49423 49429	Maintain CCI Logic CPT Text/Definition
49491	49320	NCCI Policy Manual 2021 Chapter I J

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
49492	49320	NCCI Policy Manual 2021 Chapter I J
49495	49320	NCCI Policy Manual 2021 Chapter I J
49496	49320	NCCI Policy Manual 2021 Chapter I J
49500	49320	NCCI Policy Manual 2021 Chapter I J
49501	49320	NCCI Policy Manual 2021 Chapter I J
49505	49320 49651	NCCI Policy Manual 2021 Chapter I B + C Medicare B News Issue 173 May 1999 GR 99-2 March/April
49507	49320 49651	NCCI Policy Manual 2021 Chapter I B + C Medicare B News Issue 173 May 1999 GR 99-2 March/April
49520	49320 49650	NCCI Policy Manual 2021 Chapter I B + C Medicare B News Issue 173 May 1999 GR 99-2 March/April

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
49521	49320 49650	NCCI Policy Manual 2021 Chapter I B + C Medicare B News Issue 173 May 1999 GR 99-2 March/April
49525	49320	NCCI Policy Manual 2021 Chapter I B + C Medicare B News Issue 173 May 1999 GR 99-2 March/April
49540	49320	NCCI Policy Manual 2021 Chapter I J
49550	49320	NCCI Policy Manual 2021 Chapter I J
49553	49320	NCCI Policy Manual 2021 Chapter I J
49555	49320	NCCI Policy Manual 2021 Chapter I J
49557	49320	NCCI Policy Manual 2021 Chapter I J
49560	45395 45397	NCCI Policy Manual 2021 Chapter I J
49561	45395 45397	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
49565	45395 45397	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
49566	45395 45397	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
49568	44180 49320	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
49570	45395 45397 45400 45402	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
49580	45395 45397	NCCI Policy Manual 2021 Chapter I C CPT Text/Definition
49582	45395 45397	NCCI Policy Manual 2021 Chapter I C CPT Text/Definition
49585	45395 45397 49651	NCCI Policy Manual 2021 Chapter I C Endoscopic Procedures CPT Text/Definition
49587	45395 45397	NCCI Policy Manual 2021 Chapter I C
49600	49610 49611	NCCI Policy Manual 2021 Chapter I C + M
49605	49600 49610 49611	NCCI Policy Manual 2021 Chapter I C + M

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
49606	49600 49610 49611	NCCI Policy Manual 2021 Chapter I C + M
49651	49650	CPT Text / Definition
49650	49585	NCCI Policy Manual 2021 Chapter I C Endoscopic Procedures CPT Text/Definition
49652	44970 49325 49650	NCCI Policy Manual 2021 Chapter I C Endoscopic Procedures
49654	49650	NCCI Policy Manual 2021 Chapter I C Endoscopic Procedures
49659	49320 49568	NCCI Policy Manual 2021 Chapter I C Endoscopic Procedures
49900	49320	NCCI Policy Manual 2021 Chapter I J
49904	44950	NCCI Policy Manual 2021 Chapter 1 C
49906	49320	NCCI Policy Manual 2021 Chapter I J
50080	50384	CPT Text / Definition
50081	50384	CPT Text / Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
50200	10030 50543	NCCI Policy Manual 2021 Chapter I C Chapter VII
50205	10030	NCCI Policy Manual 2021 Chapter 1 C
50220	49320 50555 50562 50592	NCCI Policy Manual 2021 Chapter I C Chapter VII C Open vs Laparoscopic
50225	49320 50555 50562 50592	NCCI Policy Manual 2021 Chapter I C Chapter VII C Open vs Laparoscopic
50230	49320 50225 50234 50555 50562 50592	NCCI Policy Manual 2021 Chapter I C Chapter VII C Open vs Laparoscopic
50234	49320 50220 50225 50555 50562 50592	NCCI Policy Manual 2021 Chapter I C Chapter VII C Open vs Laparoscopic
50236	49320 50220 50225 50230 50240 50555 50562 50592	NCCI Policy Manual 2021 Chapter I C Chapter VII C Open vs Laparoscopic
50240	49320 50220 50225 50230 50234 50555 50562 50592	NCCI Policy Manual 2021 Chapter I C Chapter VII C Open vs Laparoscopic
50250	35840 50010 50205 50390 50391 50430 50431 50432 50693 50694 50695 58660 60540 60545 75984 76000	Maintain CCI Logic

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
50280	49320	NCCI Policy Manual 2021 Chapter I J
50290	49320	NCCI Policy Manual 2021 Chapter I J
50300	49320 50250 50555 50562 50592	NCCI Policy Manual 2021 Chapter I C Chapter VII C Open vs Laparoscopic
50320	49320 50250 50300 50555 50562 50592	NCCI Policy Manual 2021 Chapter I C Chapter VII C Open vs Laparoscopic
50340	49320 50250 50555 50562 50592	NCCI Policy Manual 2021 Chapter I C Chapter VII C Open vs Laparoscopic
50360	49320	NCCI Policy Manual 2021 Chapter I J
50365	49320 50250 50360 50592	Maintain CCI Logic NCCI Policy Chapter I C9 NCCI Policy Chapter I H 5
50370	49320 50250 50592	NCCI Policy Manual 2021 Chapter 1 C
50380	49320	NCCI Policy Manual 2021 Chapter 1 J
50382	50435 75984	Maintain CCI Logic
50384	48910 50435 75984	Maintain CCI Logic

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
50387	50715 74425 75984 77012 76942 77021	Maintain CCI Logic
50389	49424 50715 74425 75984 77012 76942 77021	Maintain CCI Logic
50405	50543 50555 50562	NCCI Policy Manual 2021 Chapter 1C + VII F vs Laparoscopic Open
50432	50389	Maintain CCI Logic
50525	50543 50555 50562	NCCI Policy Manual 2021 Chapter 1C + VII F vs Laparoscopic Open
50526	50543 50555 50562	NCCI Policy Manual 2021 Chapter 1C + VII F vs Laparoscopic Open
50540	50543 50555 50562	NCCI Policy Manual 2021 Chapter 1C + VII F vs Laparoscopic Open
50542	50010 50382 50384 50390 50430 50431 50432 50436 50437 50693 50694 50695	NCCI Policy Manual 2021 Chapter I H+L Chapter VII F vs Laparoscopic Open
50543	50010 50020 50040 50045 50060 50065 50070 50075 50080 50081 50100 50120 50125 50130 50135 50250 50280 50290 50382 50384 50389 50390 50400 50430 50431 50432 50435 50436 50437 50500 50520 50551 50553 50555 50557 50561 50562 50570 50572 50574 50575 50576 50580 50592 50693 50694 50695	NCCI Policy Manual 2021 Chapter I H+L Chapter VII F vs Laparoscopic Open

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
50545	50250 50562 50592	NCCI Policy Manual 2021 Chapter I H+L
50546	50250 50562 50592	NCCI Policy Manual 2021 Chapter I H+L
50547	50250 50562 50592	NCCI Policy Manual 2021 Chapter I H+L
50548	50250 50562 50592	NCCI Policy Manual 2021 Chapter I H+L
50551	44180 50382 50384	CPT Text/Definition
50553	44180 50382 50384 50391	CPT Text/Definition
50555	44180 50382 50384 50391	CPT Text/Definition
50557	44180 50382 50384 50391	CPT Text/Definition
50561	44180 50382 50384 50391	CPT Text/Definition
50562	44180 49320 50200 50205 50280 50290 50382 50384 50389 50390 50391 50396 50435 50553 50561	CCI code pairs similar codes 50551 - 50561
50570	44180 50382 50384	CPT Text/Definition
50572	50382 50384 50391	CPT Text/Definition
50574	50382 50384 50391	CPT Text/Definition
50575	50391	CPT Text/Definition
50576	50382 50384 50391	CPT Text/Definition
50580	50382 50384 50391	CPT Text/Definition
50592	35840 43653 50010 50205 50390 50391 50430 50431 50432 50436 50437 50693 50694 50695 50715 58660 60540 60545	Maintain CCI Logic

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
50600	49320	NCCI Policy Manual 2021 Chapter I J
50605	49320	NCCI Policy Manual 2021 Chapter I J
50686	50684	Maintain CCI Logic CPT Text/Definition
50688	50684	Maintain CCI Logic CPT Text/Definition
50700	49320 50684	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
50722	49320 50684	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
50725	49320 50684	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
50727	49320 50684	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
50728	49320 50684	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
50740	49320 50684	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
50750	49320 50684	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
50760	49320 50684	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
50770	49320 50684	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
50780	49320 50684 50800 50860 50945	NCCI Policy Manual 2021 Chapter I C CPT Text/Definition
50782	49320 50684 50800 50860 50945	NCCI Policy Manual 2021 Chapter I C CPT Text/Definition
50783	49320 50684 50800 50860 50945	NCCI Policy Manual 2021 Chapter I C CPT Text/Definition
50785	50684 50800 50860 50945	NCCI Policy Manual 2021 Chapter I C CPT Text/Definition
50800	50684	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
50810	50684	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
50815	50684	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
50820	50684	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
50825	50684	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
50830	49320 50684	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
50840	50684	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
50845	49320 50684	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
50860	44180 49320 50684	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
50900	44180 49320 50684	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
50920	44180 49320 50684	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
50930	49320 50684	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
50940	44180 49320 50684	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
50945	50684	Maintain CCI Logic CPT Text/Definition
50947	50945 50948	NCCI Policy Manual 2021 Chapter I C H + L
50948	50945	NCCI Policy Manual 2021 Chapter I C H + L
50953	50391 50972	Maintain CCI Logic CPT Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
50955	50391 50974	Maintain CCI Logic CPT Text/Definition
50957	50391 50976	Maintain CCI Logic CPT Text/Definition
50961	50391	Maintain CCI Logic CPT Text/Definition
50970	50951	Maintain CCI Logic CPT Text/Definition
50972	50391	CPT Text/Definition
50974	50391	CPT Text/Definition
50976	50391	CPT Text/Definition
50980	50391	CPT Text/Definition
51045	51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C
51050	51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C
51060	51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C
51065	51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C
51080	51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C
51500	51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
51520	51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C
51525	51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C
51530	51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C
51535	51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C
51550	51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C
51555	51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C
51565	44180 51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C
51570	44180 51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C
51575	51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C + H
51580	51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C + H
51585	51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C + H
51590	51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C + H

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
51595	51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C + H
51596	51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C + H
51597	45400 45402 51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C + H
51600	51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C + H
51605	51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C + H
51610	51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C + H
51700	51100 51101 51102	NCCI Policy Manual 2021 Chapter I B + C + H
51702	51100 51101	NCCI Policy Manual Chapter I B
51703	51100 51101 51102	NCCI Policy Manual Chapter I B
51705	51100 51101 51102	NCCI Policy Manual Chapter I B
51710	51100 51101 51102 51700	NCCI Policy Manual Chapter I B
51715	51100 51101 51102	NCCI Policy Manual Chapter I B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
51720	51100 51101 51102	NCCI Policy Manual Chapter I B
51800	44180	NCCI Policy Manual 2021 Chapter I J Chapter IV F
51820	44180	NCCI Policy Manual 2021 Chapter I J Chapter IV F
51840	44180 53500	NCCI Policy Manual 2021 Chapter I C +J Chapter IV F
51841	44180 53500	NCCI Policy Manual 2021 Chapter I C +J Chapter IV F
51845	44180 53500 53860	NCCI Policy Manual 2021 Chapter I C +J Chapter IV F
51860	44180	NCCI Policy Manual 2021 Chapter I J Chapter IV F
51880	44180 49320	NCCI Policy Manual 2021 Chapter I J Chapter IV F
51900	44180	NCCI Policy Manual 2021 Chapter I J Chapter IV F
51920	44180	NCCI Policy Manual 2021 Chapter I J Chapter IV F
51925	58545 58546 58550 58552 58553 58554 58555 58558 58559 58560 58561 58562 58563 58600 58615 58660 58661 58662 58670 58671 58672 58673 58700 58720 58740 58750 58752 58760 58770	NCCI Policy Manual 2021 Chapter VII F Open vs Laparoscopic
51940	44180 49320	NCCI Policy Manual 2021 Chapter I J Chapter IV F

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
51980	44180	NCCI Policy Manual 2021 Chapter I J Chapter IV F
51990	53500 53860	Maintain CCI Logic CPT Text/Definition
51992	53500 53860	Maintain CCI Logic CPT Text/Definition
52010	51700 52005	NCCI Policy Manual 2021 Chapter VII C
52214	51700	NCCI Policy Manual 2021 Chapter VII C
52224	51700	NCCI Policy Manual 2021 Chapter VII C
52250	51700 52005	NCCI Policy Manual 2021 Chapter VII C
52260	51700	NCCI Policy Manual 2021 Chapter VII C
52265	51700	NCCI Policy Manual 2021 Chapter VII C
52270	51700 52005	NCCI Policy Manual 2021 Chapter VII C
52275	51700 52005	NCCI Policy Manual 2021 Chapter VII C
52287	52005 52214 52270 52276	CCI code pairs similar code 52285

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
52305	52290	NCCI Policy Manual 2021 Chapter I H + L
52341	51700 52334	NCCI Policy Manual 2021 Chapter VII C
52342	51700 52341	NCCI Policy Manual 2021 Chapter VII C
52343	51700 52341 52342	NCCI Policy Manual 2021 Chapter VII C
52344	51700 52342 52343	NCCI Policy Manual 2021 Chapter VII C
52345	51700 52341 52343 52344	NCCI Policy Manual 2021 Chapter VII C
52346	51700 52341 52342 52344 52345	NCCI Policy Manual 201 Chapter 1 C
52351	51700	NCCI Policy Manual 2021 Chapter VII C
52354	51700	NCCI Policy Manual 2021 Chapter VII C
52355	50555 50562 52332	NCCI Policy Manual 2021 Chapter VII C
52450	52310 52700	NCCI Policy Manual 2021 Chapter VII D
52500	52700	NCCI Policy Manual 2021 Chapter VII D

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
52601	52700	NCCI Policy Manual 2021 Chapter VII D
52630	52700	NCCI Policy Manual 2021 Chapter VII D
52640	52700	NCCI Policy Manual 2021 Chapter VII D
53200	10030	NCCI Policy Manual 201 Chapter 1 C
53240	53235	Maintain CCI Logic
53415	53410	CPT Text/Definition
53444	51700	NCCI Policy Manual 201 Chapter 1 C
53445	53449	NCCI Policy Manual 2021 Chapter 1 L
53448	51700	NCCI Policy Manual 2021 Chapter VII C
53600	53860	Same edits as 0193T
53601	53860	Same edits as 0193T
53605	53600 53601 53860	NCCI Policy Manual 2021 Chapter 1 L
53620	53860	Same edits as 0193T
53621	53860	Same edits as 0193T
53665	53660 53661	Maintain CCI Logic NCCI Policy Chapter I L

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
53860	52287	Maintain CCI Logic CCI code pair similar code 52285
54015	54000	NCCI Policy Manual 2021 Chapter 1 J
54055	54050	NCCI Policy Manual 2021 Chapter 1 L
54100	10030	NCCI Policy Manual 2021 Chapter 1 C
54105	10030	NCCI Policy Manual 2021 Chapter 1 C
54115	54015	NCCI Policy Manual 2021 Chapter 1 C
54130	54120 54125	NCCI Policy Manual 2021 Chapter I H + L
54135	38770 54120 54125 54130	NCCI Policy Manual 2021 Chapter I H + L
54231	54230	CPT Text/Definition
54312	54318 54322	NCCI Policy Manual 2021 Chapter 1 L
54316	54308 54312 54318 54322 54324 54326 54328	NCCI Policy Manual 2021 Chapter 1 L
54318	54308	NCCI Policy Manual 2021 Chapter 1 L

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
54322	54308 54318	NCCI Policy Manual 2021 Chapter 1 L
54324	54308 54312 54318 54322 54328	NCCI Policy Manual 2021 Chapter 1 L
54326	54308 54312 54318 54322	NCCI Policy Manual 2021 Chapter 1 L
54328	54308 54312 54318 54322	NCCI Policy Manual 2021 Chapter 1 L
54344	54340	NCCI Policy Manual 2021 Chapter 1 L
54348	54340 54344	NCCI Policy Manual 2021 Chapter 1 L
54500	10030	NCCI Policy Manual 2021 Chapter 1 C
54505	10030 54500	Maintain CCI Logic NCCI Policy Chapter I J+L
54520	44180 49320	NCCI Policy Manual 2021 Chapter I C+J Chapter VI F
54535	54520	NCCI Policy Manual 2021 Chapter 1 L
54640	44180 54860	NCCI Policy Manual 2021 Chapter IV F
54800	10030	NCCI Policy Manual 2021 Chapter 1 C

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
54861	54840	NCCI Policy Manual 2021 Chapter 1 H
55040	55000	NCCI Policy Manual 2021 Chapter IV D
55041	55000	NCCI Policy Manual 2021 Chapter IV D
55060	55000	NCCI Policy Manual 2021 Chapter IV D
55100	55000	NCCI Policy Manual 2021 Chapter IV D
55120	55000	NCCI Policy Manual 2021 Chapter IV D
55150	55000	NCCI Policy Manual 2021 Chapter IV D
55175	55000	NCCI Policy Manual 2021 Chapter IV D
55180	55000	NCCI Policy Manual 2021 Chapter IV D
55200	55000	NCCI Policy Manual 2021 Chapter IV D
55250	55000	NCCI Policy Manual 2021 Chapter IV D
55300	55000	NCCI Policy Manual 2021 Chapter IV D

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
55400	55000	NCCI Policy Manual 2021 Chapter IV D
55500	55550	NCCI Policy Manual 2021 Chapter IV D
55520	55550	NCCI Policy Manual 2021 Chapter IV D
55535	44180 55520 55530	NCCI Policy Manual 2021 Chapter I C+J Chapter VI F
55540	44180 49320 55535	NCCI Policy Manual 2021 Chapter I C+J Chapter VI F
55700	10030	NCCI Policy Manual 2021 Chapter 1 C
55705	10030 44180	NCCI Policy Manual 2021 Chapter IV F
55706	10030	NCCI Policy Manual 2021 Chapter 1 C
55866	52400 52450 52500 52700 55720 55725	NCCI Policy Manual 2021 Chap I C + L Open vs Laparoscopic
56405	56821 57420 57421 57455 57456 57461	Maintain CCI Logic CPT Text/Definition
56420	56821 57420 57421 57455 57456 57461	Maintain CCI Logic CPT Text/Definition
56440	56821 57420 57421 57455 57456 57461	Maintain CCI Logic CPT Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
56441	56821 57420 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
56442	56821 57420 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
56515	56821 57420 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
56605	57420 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
56620	57420 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
56625	57420 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
56630	56625 57420 57421 57455 57456 57461	NCCI Policy Manual 2021 Chapter I H + L
56631	56620 56625 57420 57421 57455 57456 57461	NCCI Policy Manual 2021 Chapter I H + L
56632	56620 56625 56631 56633 56634 57420 57421 57455 57456 57461	NCCI Policy Manual 2021 Chapter I H + L
56633	56620 56625 56630 56631 57420 57421 57455 57456 57461	NCCI Policy Manual 2021 Chapter I H + L
56634	56620 56625 56630 56631 57420 57421 57455 57456 57461	NCCI Policy Manual 2021 Chapter I H + L
56637	56620 56625 56630 56631 56632 56634 56640 57420 57421 57455 57456 57461	NCCI Policy Manual 2021 Chapter I H + L

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
56640	49320 56620 56625 56630 56631 56632 56633 56634 57420 57421 57455 57456 57461	NCCI Policy Manual 2021 Chapter I H + L
56700	56821 57420 57421 57455 57456 57461	Maintain CCI Logic CPT Text/Definition
56740	56821 57420 57421 57455 57456 57461	Maintain CCI Logic CPT Text/Definition
56800	56821 57420 57421 57455 57456 57461	Maintain CCI Logic CPT Text/Definition
56810	56821 57420 57421 57455 57456 57461	Maintain CCI Logic CPT Text/Definition
56820	53080 57100 57180	CCI code pairs similar code 57452 CPT Text/Definition
56821	57100 57180	CCI code pairs similar code 57452 CPT Text/Definition
57000	56820 56821 57421 57455 57456 57461	Maintain CCI Logic CPT Text/Definition
57010	56820 56821 57421 57455 57456 57461	Maintain CCI Logic CPT Text/Definition
57020	56820 56821 57421 57455 57456 57461	Maintain CCI Logic CPT Text/Definition
57022	56820 56821 57421 57455 57456 57461	Maintain CCI Logic CPT Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
57023	56820 56821 57022 57421 57455 57456 57461	NCCI Policy Manual 2021 Chapter 1 H + L
57061	56820 56821 57455 57456 57461	Maintain CCI Logic CPT Text/Definition
57065	56820 56821 57421 57455 57456 57461	Maintain CCI Logic CPT Text/Definition
57100	10030	NCCI Policy Manual 2021 Chapter 1 C
57105	10030 56820 56821 57421 57455 57456 57461	Maintain CCI Logic CPT Text/Definition
57106	56820 56821 57455 57456 57461	Maintain CCI Logic CPT Text/Definition
57107	56820 56821 57455 57456 57461	Maintain CCI Logic CPT Text/Definition
57109	56820 56821 57455 57456 57461	Maintain CCI Logic CPT Text/Definition
57110	49320 56820 56821 57455 57456 57461	NCCI Policy Manual 2021 Chapter 1 C
57111	49320 56820 56821 57455 57456 57461	NCCI Policy Manual 2021 Chapter 1 C
57120	49320 56820 56821 57421 57455 57456 57461	NCCI Policy Manual 2021 Chapter 1 C
57130	49320 56820 56821 57421 57455 57456 57461	NCCI Policy Manual 2021 Chapter 1 C

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
57135	49320 56820 56821 57455 57456 57461	NCCI Policy Manual 2021 Chapter 1 C
57150	56820 56821 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
57155	56820 56821 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
57156	56820 56821 57421 57455 57456 57461 S2270	Maintain CCI Logic Text/Definition CPT
57160	56820 56821 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
57170	56820 56821 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
57200	56820 56821 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
57210	56820 56821 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
57240	56820 56821 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
57250	56820 56821 57421 57455 57456 57461	NCCI Policy Manual 2021 Chapter 1 C
57260	56820 56821 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
57265	56820 56821 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
57268	56820 56821 57421 57425 57455 57456 57461	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
57270	56820 56821 57421 57425 57455 57456 57461	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
57280	56820 56821 57421 57455 57456 57461	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
57282	56820 56821 57421 57455 57456 57461	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
57283	44850 49000 49002 49010 56820 56821 57421 57425 57455 57456 57461	CPT Text/Definition
57285	53860 56820 56821 57421 57425 57455 57456 57461	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
57284	51992 56820 56821 57421 57425 57455 57456 57461	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
57287	51990 53500 56820 56821 57421 57455 57456 57461	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic
57288	51990 53500 56820 56821 57421 57455 57456 57461	NCCI Policy Manual 2021 Chapter I C Open vs Laparoscopic

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
57289	56820 56821 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
57291	56820 56821 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
57292	56820 56821 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
57295	44950 50715 56820 56821 57421 57455 57456 57461	Maintain CCI Logic
57300	56820 56821 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
57305	56820 56821 57308 57420 57421 57455 57456 57461	NCCI Policy Manual 2021 Chapter I C + H
57307	56820 56821 57300 57308 57421 57455 57456 57461	NCCI Policy Manual 2021 Chapter I C + H
57308	56820 56821 57300 57421 57455 57456 57461	NCCI Policy Manual 2021 Chapter I C + H
57310	56820 56821 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
57311	56820 56821 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
57320	56820 56821 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
57330	56820 56821 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
57335	56820 56821 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
57400	56820 56821	NCCI Policy Manual 2021 Chapter VII E
57415	56820 56821 57421 57455 57456 57461	Maintain CCI Logic CPT Text/Definition
57420	44180 51700 56820 56821	NCCI Policy Manual 2021 Chapter VII E
57421	51700 56820 56821	NCCI Policy Manual 2021 Chapter VII E
57425	49321 49322 57100 57400 57415 57500 57800 58100	Maintain CCI Logic CPT Text/Definition
57452	56820 56821	NCCI Policy Manual 2021 Chapter VII E
57454	56820 56821	NCCI Policy Manual 2021 Chapter VII E
57455	56820 56821 57456 57558	Maintain CCI Logic CPT Text/Definition
57456	56820 56821 57558	Maintain CCI Logic CPT Text/Definition
57460	56820 56821 57456	Maintain CCI Logic CPT Text/Definition
57461	56820 56821 57505 57558	Maintain CCI Logic CPT Text/Definition
57500	10030 56820 56821	Maintain CCI Logic CPT Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
57505	56820 56821	Maintain CCI Logic Text/Definition CPT
57510	56820 56821 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
57511	56820 56821 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
57513	56820 56821 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
57520	56820 56821 57421 57456	Maintain CCI Logic Text/Definition CPT
57522	56820 56821 57456	Maintain CCI Logic Text/Definition CPT
57530	49320 56820 56821	NCCI Policy Manual 2021 Chapter I C + H
57531	49320 56820 56821 57455 57456 57461 57500 57505 57510 57511 57513 57520 57522 57720	NCCI Policy Manual 2021 Chapter I C + H
57540	56820 56821 57455 57456 57461 57550 57555 57556	NCCI Policy Manual 2021 Chapter I C + H
57545	56820 56821 57455 57456 57461 57555 57556	NCCI Policy Manual 2021 Chapter I C + H
57550	56820 56821 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
57555	56820 56821 57455 57456 57461	Maintain CCI Logic Text/Definition CPT

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
57556	56820 56821 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
57558	56820 56821 57421	Maintain CCI Logic Text/Definition CPT
57700	56820 56821 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
57720	56820 56821 57421 57455 57456 57461	Maintain CCI Logic Text/Definition CPT
57800	56820 56821	NCCI Policy Manual 2021 Chapter VII E
58100	00940 10030 56820 56821 57420	NCCI Policy Manual 2021 Chapter I C Chapter VII E
58120	56820 56821 57420 57421 57455 57456 57461 58301	NCCI Policy Manual 2021 Chapter I B
58140	58660 58674	NCCI Policy Manual 2021 Chapter I B + C
58145	44180 49320	NCCI Policy Manual 2021 Chapter I C+J Chapter IV F
58146	57500 58545 58546 58674	NCCI Policy Manual 2021 Chapter I C Chapter VII
58150	58260 58262 58267 58275 58290 58292	NCCI Policy Manual 2021 Chapter I C Chapter VII
58152	58260 58262 58263 58267 58270 58275 58280 58290 58291 58292 58294	NCCI Policy Manual 2021 Chapter I C Chapter VII

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
58180	58260 58262 58263 58267 58270 58275 58290 58291 58292 58294	NCCI Policy Manual 2021 Chapter I C Chapter VII
58200	51925 58285	NCCI Policy Manual 2021 Chapter I C Chapter VII
58210	51925 58152 58180 58200 58260 58262 58263 58267 58270 58275 58280 58285 58290 58291 58292 58294	NCCI Policy Manual 2021 Chapter I C+M Chapter VII
58240	45400 45402 51925 56820 56821 57400 57420 57421 57455 57456 57461 58285	NCCI Policy Manual 2021 Chapter I C+M Chapter VII
58260	56820 56821 57400 57421 57455 57456 57461 58553	NCCI Policy Manual 2021 Chapter I C+M Chapter VII
58262	56820 56821 57400 57421 57455 57456 57461	NCCI Policy Manual 2021 Chapter I C+M Chapter VII
58263	56820 56821 57400 57421 57455 57456 57461 58150 58275 58553	NCCI Policy Manual 2021 Chapter I C+M Chapter VII
58267	56820 56821 57400 57421 57455 57456 57461 58275 58553	NCCI Policy Manual 2021 Chapter I C+M Chapter VII
58270	56820 56821 57400 57421 57455 57456 57461 58553	NCCI Policy Manual 2021 Chapter I C+M Chapter VII
58275	56820 56821 57400 57421 57455 57456 57461 58260 58262 58270 58290 58291 58292 58294 58553	NCCI Policy Manual 2021 Chapter I C+M Chapter VII
58280	56820 56821 57400 57421 57455 57456 57461 58150 58180 58262 58267 58291 58553	NCCI Policy Manual 2021 Chapter I C+M Chapter VII
58285	51925 56820 56821 57400 57421 57455 57456 57461 58150 58152 58180 58260 58262 58263 58267 58270 58275 58280 58290 58291 58292 58294 58553	NCCI Policy Manual 2021 Chapter I C + M Chapter VII C + E

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
58290	49320 49321 49322 51102 56820 56821 57421 57455 57456 57461 57510 57511 57513 57520 57700 58146 58545 58546 58661 58670 58671 58672 58673 58700 58800 58820 58900 58925 58940	NCCI Policy Manual Chapter I C + M Chapter VII
58291	49320 49321 51102 56820 56821 57268 57421 57455 57456 57461 57510 57511 57513 57520 57700 58146 58150 58290 58545 58546	NCCI Policy Manual Chapter I C + M Chapter VII
58292	49320 49321 51102 56820 56821 57421 57455 57456 57461 58146 58290 58545 58546	NCCI Policy Manual Chapter I C + M Chapter VII
58294	49320 49321 49322 51102 56820 56821 57421 57455 57456 57461 58146 58545 58546 58670 58671 58672 58673 58700 58800 58820 58900 58925 58940	NCCI Policy Manual Chapter I C + M Chapter VII
58300	99211 99212 99213 99214 99215	NCCI Policy Manual 2021 Chapter I D
58346	57155	CPT Text/Definition
58356	57100 57530 58559	CPT Text/Definition
58545	0071T 0072T 49322	NCCI Policy Manual 2021 Chapter I C
58546	0071T 0072T 49322	NCCI Policy Manual 2021 Chapter I C
58550	0071T 0072T 57425	NCCI Policy Manual 2021 Chapter I C + L Open vs Laparoscopic
58552	0071T 0072T 58600 58605 58611 58615 58800 58805 58820 58822 58900 58920 58925	NCCI Policy Manual 2021 Chapter I C
58553	0071T 0072T 49322 58558 58600 58605 58611 58615 58660 58800 58805 58820 58822 58900 58920 58925 58940	NCCI Policy Manual 2021 Chapter I C

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
58554	0071T 0072T 58800 58805 58820 58822 58900 58920 58925	NCCI Policy Manual 2021 Chapter I C
58555	56820 56821 57400 57420 57421 57455 57456 57461	Maintain CCI Logic CPT Text/Definition
58558	56820 56821 57400 57420 57421 57455 57456 57461	Maintain CCI Logic CPT Text/Definition
58559	56820 56821 57400 57420 57421 57455 57456 57461	Maintain CCI Logic CPT Text/Definition
58560	56820 56821 57400 57420 57421 57455 57456 57461 58559	Maintain CCI Logic CPT Text/Definition
58561	0071T 0072T 56820 56821 57400 57420 57421 57455 57456 57461 58559	NCCI Policy Manual 2021 Chapter I C
58562	56820 56821 57400 57420 57421 57455 57456 57461 58559	NCCI Policy Manual 2021 Chapter I C
58563	0071T 0072T 56820 56821 57400 57420 57421 57455 57456 57461 58559	NCCI Policy Manual 2021 Chapter I C
58565	50715 56820 56821 57100 57420 57421 57455 57456 57461 58600 58605 58670 A4264	CPT Text/Definition Practice expense RVUs
58600	56820 56821 57400 57420 57421 57455 57456 57461	NCCI Policy Manual Chapter I C + M Chapter VII
58605	56820 56821 57400 57420 57421 57455 57456 57461	NCCI Policy Manual Chapter I C + M Chapter VII
58615	56820 56821 57400 57420 57421 57455 57456 57461	NCCI Policy Manual Chapter I C + M Chapter VII

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
58661	58671	NCCI Policy Manual 2021 Chapter I B + C + H + M
58662	58661 58670 58740	NCCI Policy Manual 2021 Chapter I B + H + M
58670	58740	NCCI Policy Manual 2021 Chapter I B + C + M Chapter VII
58671	58740	NCCI Policy Manual 2021 Chapter I B + C + M Chapter VII
58672	58740	NCCI Policy Manual 2021 Chapter I B + C + M Chapter VII
58673	58662 58670 58671 58740	NCCI Policy Manual 2021 Chapter I B + C + M
58674	0071T 0072T 58145	NCCI Policy Manual 2021 Chapter I C + M Chapter VII
58700	58660	NCCI Policy Manual 2021 Chapter I C + M Chapter VII
58720	58660	NCCI Policy Manual 2021 Chapter I C + M Chapter VII
58750	58740	NCCI Policy Manual 2021 Chapter I B + C + M Chapter VII

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
58752	58740	NCCI Policy Manual 2021 Chapter I B + C + M Chapter VII
58760	58740	NCCI Policy Manual 2021 Chapter I B + C + M Chapter VII
58770	58661 58662 58670 58671 58700 58720 58740	NCCI Policy Manual 2021 Chapter I C + L
58800	44180 56820 56821 57400 57420 57421 57455 57456 57461	NCCI Policy Manual 2021 Chapter I C + L
58820	44180 56820 56821 57400 57420 57421 57455 57456 57461 58740	NCCI Policy Manual 2021 Chapter I B + C + L
58822	58805	NCCI Policy Manual 2021 Chapter I C + L
58825	58740	NCCI Policy Manual 2021 Chapter I B + C + M Chapter VII
58900	10030	NCCI Policy Manual 2021 Chapter I C
58920	58740	NCCI Policy Manual 2021 Chapter I B + C + M Chapter VII
58943	51925	NCCI Policy Manual 2021 Chapter I B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
58950	0071T 0072T 51925	NCCI Policy Manual 2021 Chapter I C
58951	0071T 0072T 51925 58260 58262 58263 58267 58270 58275 58280 58285 58290 58291 58292 58294 58553	NCCI Policy Manual 2021 Chapter I B + C
58952	0071T 0072T 51925 58290 58291 58292 58294 58545 58546 58553	NCCI Policy Manual 2021 Chapter I B + C
58953	0071T 0072T 38571 38572 51925 58290 58291 58292 58294 58552 58553 58554	NCCI Policy Manual 2021 Chapter I B + C
58954	0071T 0072T 51925	NCCI Policy Manual 2021 Chapter I C
58956	0071T 0072T 01962 01963 01969 51840 57522 58353	Maintain CCI Logic
58960	0071T 0072T 51925 58740	NCCI Policy Manual 2021 Chapter I B + C
59070	59000 59001 59012 59050 59051	Maintain CCI Logic CPT Text/Definition
59072	59000 59001 59012 59050 59051	Maintain CCI Logic CPT Text/Definition
59074	59000 59001 59012 59050 59051	Maintain CCI Logic CPT Text/Definition
59076	59000 59001 59012 59050 59051	Maintain CCI Logic CPT Text/Definition
59100	59852	CPT Text/Definition
59120	59121 59140 59150 59151	NCCI Policy Manual 2021 Chapter I C + L

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
59121	59140 59150 59151	NCCI Policy Manual 2021 Chapter I C + L
59130	59120 59121 59136 59140 59150 59151	NCCI Policy Manual 2021 Chapter I C + L
59136	59120 59121 59140 59150 59151	NCCI Policy Manual 2021 Chapter I C + L
59140	59150 59151	NCCI Policy Manual 2021 Chapter I C + L
59160	59414	Maintain CCI Logic CPT Text/Definition
59350	58520	CPT Text/Definition
59400	12042 59160 59410 59425 59426 59430 59514 59515	NCCI Policy Manual 2021 Chapter VII G
59409	12042 59160	NCCI Policy Manual 2021 Chapter VII G
59410	12042 59160	NCCI Policy Manual 2021 Chapter VII G
59510	58605 59160 59200 59400 59410 59425 59426 59514 59515	Maintain CCI Logic CPT Text/Definition
59514	58605 59160 59200 59409 59410	Maintain CCI Logic CPT Text/Definition
59515	58605 59160 59200 59410	Maintain CCI Logic CPT Text/Definition
59610	59160 59200	Maintain CCI Logic CPT Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
59612	59160 59200	Maintain CCI Logic CPT Text/Definition
59614	59160 59200 59425 59426	Maintain CCI Logic CPT Text/Definition
59618	58605 59160 59200	Maintain CCI Logic CPT Text/Definition
59620	58605 59160 59200	Maintain CCI Logic CPT Text/Definition
59622	58605 59160 59200	Maintain CCI Logic CPT Text/Definition
59812	44180 57800 59160 59200 59425 59426 59430 S0199 S2260 S2265 S2266 S2267	Maintain CCI Logic CPT/HCPCS Text/Definition
59820	44180 57800 59160 59200 59425 59426 59430 59812 S0199 S2260 S2265 S2266 S2267	Maintain CCI Logic CPT/HCPCS Text/Definition
59821	44180 57800 S0199 S2260 S2265 S2266 S2267	Maintain CCI Logic CPT/HCPCS Text/Definition
59830	44180 57800 59160 59200 59425 59426 59430 59812 59820 59821 S0199 S2260 S2265 S2266 S2267	Maintain CCI Logic CPT/HCPCS Text/Definition
59840	44180 57800 59160 59200 59425 59426 59430 S0199 S2260 S2265 S2266 S2267	Maintain CCI Logic CPT/HCPCS Text/Definition
59841	44180 57800 59160 59200 59425 59426 59430 59840 59850 59851 S0199 S2260 S2265 S2266 S2267	Maintain CCI Logic CPT/HCPCS Text/Definition
59850	44180 57800 59160 59425 59426 59430 S0199 S2260 S2265 S2266 S2267	Maintain CCI Logic CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
59851	44180 57800 59160 59425 59426 59430 59840 S0199 S2260 S2265 S2266 S2267	Maintain CCI Logic CPT/HCPCS Text/Definition
59852	44180 57800 59160 59425 59426 59430 59840 59841 59851 S0199 S2260 S2265 S2266 S2267	Maintain CCI Logic CPT/HCPCS Text/Definition
59855	44180 57800 59425 59426 59430 S0199 S2260 S2265 S2266 S2267	Maintain CCI Logic CPT/HCPCS Text/Definition
59856	44180 57800 59425 59426 59430 59855 S0199 S2260 S2265 S2266 S2267	Maintain CCI Logic CPT/HCPCS Text/Definition
59857	57800 59425 59426 59430 59856 S0199 S2260 S2265 S2266 S2267	Maintain CCI Logic CPT/HCPCS Text/Definition
59866	44180	NCCI Policy Manual 2021 Chapter VII E
59870	44180	NCCI Policy Manual 2021 Chapter VII E
60100	10030	NCCI Policy Manual 2021 Chapter 1 C
60300	10030	NCCI Policy Manual 2021 Chapter 1 C
60505	39010	NCCI Policy Manual 2021 Chapter 1 C
61105	61720 61735 61750 61751 61770 61850	Maintain CCI Logic Text/Definition Reference

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
61107	61720 61735 61750 61751 61770 61850	Maintain CCI Logic CPT Text/Definition Coders Desk Reference
61108	61720 61735 61750 61751 61770 61850	Maintain CCI Logic CPT Text/Definition Coders Desk Reference
61120	61720 61735 61750 61751 61770 61850	Maintain CCI Logic CPT Text/Definition Coders Desk Reference
61140	61720 61735 61770 61850	Maintain CCI Logic CPT Text/Definition Coders Desk Reference
61150	61720 61735 61750 61751 61770 61850	Maintain CCI Logic CPT Text/Definition Coders Desk Reference
61151	61720 61735 61750 61751 61770 61850	Maintain CCI Logic CPT Text/Definition Coders Desk Reference
61154	61720 61735 61750 61751 61770 61850	Maintain CCI Logic CPT Text/Definition Coders Desk Reference
61156	61720 61735 61770 61850	Maintain CCI Logic CPT Text/Definition Coders Desk Reference

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
61210	61720 61735 61750 61751 61770 61850	Maintain CCI Logic CPT Text/Definition Coders Desk Reference
61250	61720 61735 61750 61751 61770 61850	Maintain CCI Logic CPT Text/Definition Coders Desk Reference
61253	61720 61735 61750 61751 61770 61850	Maintain CCI Logic CPT Text/Definition Coders Desk Reference
61304	62161	Maintain CCI Logic Open vs Neuroendoscopic
61305	62161	Maintain CCI Logic Open vs Neuroendoscopic
61312	61105 61250 62161	Maintain CCI Logic NCCI Policy Chapter VIII C CPT Assistant Sept 2002
61313	61140 61156 61250 62161	Maintain CCI Logic NCCI Policy Chapter VIII C CPT Assistant Sept 2002
61314	61154 61253 61322 62161	Maintain CCI Logic NCCI Policy Chapter VIII C CPT Assistant Sept 2002
61315	61253 61322	Maintain CCI Logic NCCI Policy Chapter VIII C CPT Assistant Sept 2002

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
61320	61140 61150 61151 61250 61322 62161	Maintain CCI Logic NCCI Policy Chapter VIII C CPT Assistant Sept 2002
61321	61140 61150 61151 61253 61322 62161	Maintain CCI Logic NCCI Policy Chapter VIII C CPT Assistant Sept 2002
61322	61210 61305 61340 61345	Maintain CCI Logic CPT Text/Definition
61323	61305 61314 61315 61320 61321 61345 61550 61552 61556 61557 61570 61571	Maintain CCI Logic CPT Text/Definition
61330	62161	Maintain CCI Logic Open vs Neuroendoscopic
61333	62161	Maintain CCI Logic Open vs Neuroendoscopic
61343	61322 61323	Maintain CCI Logic CPT Text/Definition
61450	61322 61323	Maintain CCI Logic CPT Text/Definition
61458	61322 61323	Maintain CCI Logic CPT Text/Definition
61460	61322 61323	Maintain CCI Logic CPT Text/Definition
61500	61322 61323 62161 62164	Maintain CCI Logic Open vs Neuroendoscopic

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
61501	61322 61323 62161 62164	Maintain CCI Logic Neuroendoscopic Open vs
61510	61322 61323 62161	Maintain CCI Logic Neuroendoscopic Open vs
61512	61322 61323 62161	Maintain CCI Logic Neuroendoscopic Open vs
61514	61322 61323 62161 62164	Maintain CCI Logic Neuroendoscopic Open vs
61516	61322 61323 62164	Maintain CCI Logic Neuroendoscopic Open vs
61518	61322 61323 62161 62162	Maintain CCI Logic Neuroendoscopic Open vs
61519	61322 61323 62161	Maintain CCI Logic Neuroendoscopic Open vs
61520	61322 61323 62161	Maintain CCI Logic Neuroendoscopic Open vs
61521	61322 61323 62161	Maintain CCI Logic Neuroendoscopic Open vs
61522	61322 61323 62161 62164	Maintain CCI Logic Neuroendoscopic Open vs
61524	61322 61323 62164	Maintain CCI Logic Neuroendoscopic Open vs
61526	61322 61323 62161	Maintain CCI Logic Neuroendoscopic Open vs

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
61530	61322 61323 62161	Maintain CCI Logic Neuroendoscopic Open vs
61535	62161 62164	Maintain CCI Logic Neuroendoscopic Open vs
61536	61537 61540 61566 61567	Maintain CCI Logic
61537	61108 61120 61140 61150 61151 61154 61156 61305	Maintain CCI Logic Policy Chapter VIII C NCCI
61538	61322 61323 62161 62164	Maintain CCI Logic Policy Chapter I H Open vs NCCI
61539	61322 61323 62161 62164	Maintain CCI Logic Policy Chapter I H Open vs NCCI
61540	61108 61120 61140 61150 61151 61154 61156 61210 61305	Maintain CCI Logic Policy Chapter VIII C NCCI
61545	61322 61323 62161	Maintain CCI Logic Neuroendoscopic Open vs
61546	61322 61323 62161 62164	Maintain CCI Logic Neuroendoscopic Open vs
61548	61322 61323 62161 62164	Maintain CCI Logic Neuroendoscopic Open vs
61550	61322 62161	Maintain CCI Logic Neuroendoscopic Open vs
61552	61322 62161	Maintain CCI Logic Neuroendoscopic Open vs

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
61556	61322 61550 61552	Maintain CCI Logic Policy Chapter I C + L NCCI
61557	61322 61550 61552	Maintain CCI Logic Policy Chapter I C + L NCCI
61558	61322 61550 61552 61556 61557	Maintain CCI Logic Policy Chapter I C + L NCCI
61559	61322 61550 61552 61556 61557	Maintain CCI Logic Policy Chapter I C + L NCCI
61563	61322	Maintain CCI Logic Text/Definition CPT
61564	61322	Maintain CCI Logic Text/Definition CPT
61566	61108 61120 61140 61150 61151 61154 61156 61210 61305	Maintain CCI Logic Policy Chapter VIII C NCCI
61567	61108 61120 61140 61150 61151 61154 61156 61210 61305 61566	Maintain CCI Logic Policy Chapter VIII C NCCI
61570	61322	Maintain CCI Logic Neuroendoscopic Open vs
61571	61322	Maintain CCI Logic Neuroendoscopic Open vs
61575	61322 62161	Maintain CCI Logic Neuroendoscopic Open vs
61576	61322 62161	Maintain CCI Logic Neuroendoscopic Open vs
61580	31254 31255 31287	CPT Text / Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
61581	31254 31255 31287	CPT Text / Definition
61623	36222 36223 36224 36225 36226 75894	CPT Text/Definition CCI code pairs similar code 36215
61624	61623 61630	Maintain CCI Logic Open vs Neuroendoscopic
61626	61623 61630	Maintain CCI Logic Open vs Neuroendoscopic
61630	36221 36222 36223 36224 36225 36226 37606 37607 37609 75894 95812 95813 95829 95955	Maintain CCI Logic CCI code pairs similar codes 36200 36215
61635	0075T 01925 36221 36222 36223 36224 36225 36226 34813 36831 36832 36833 36860 36861	Maintain CCI Logic CCI code pairs similar codes 36200 36215
61720	61864 61868	Maintain CCI Logic CPT Text/Definition
61750	61864 61868 70557 70558 70559	Maintain CCI Logic
61751	61864 61868 70557 70558 70559	Maintain CCI Logic CPT Text/Definition
61781	63621	CPT Text/Definition
61782	63621	CPT Text/Definition
61790	61864 61868	Maintain CCI Logic
61791	61864 61868	Maintain CCI Logic

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
61796	61864 61868 62161	Maintain CCI Logic Open vs Neuroendoscopic CPT/HCPCS Text/Definition
61798	61864 61868 62161	Maintain CCI Logic Open vs Neuroendoscopic CPT/HCPCS Text/Definition
61800	61864 61868 62161	Maintain CCI Logic Open vs Neuroendoscopic CPT/HCPCS Text/Definition
61850	61864 61868	Maintain CCI Logic
61860	61864 61868	Maintain CCI Logic
61863	61107 61108 61120 61140 61150 61151 61154 61156 62115 62117 62120 62121 95962	Maintain CCI Logic NCCI Policy Chapter VIII
61867	61107 61108 61120 61140 61150 61151 61154 61156 61864 62115 62117 62120 62121 95962	Maintain CCI Logic NCCI Policy Chapter I H NCCI Policy Chapter VIII
61880	61864 61868	Maintain CCI Logic
62162	62161 62225	Maintain CCI Logic CPT Text/Definition
62164	61020 61026 62161 62162 62225	Maintain CCI Logic CPT Text/Definition
62165	62225	Maintain CCI Logic CPT Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
62267	10030	NCCI Policy Manual 2021 Chapter 1 C
62268	10030	NCCI Policy Manual 2021 Chapter 1 C
62269	10030	NCCI Policy Manual 2021 Chapter 1 C
62287	22857	CPT Text/Definition
62351	96521	Maintain CCI Logic
62320	77001 77002 77003	CPT Text/Definition
62321	77001 77002 77003	CPT Text/Definition
62322	77001 77002 77003	CPT Text/Definition
62323	77001 77002 77003	CPT Text/Definition
62324	77001 77002 77003	CPT Text/Definition
62325	77001 77002 77003	CPT Text/Definition
62326	77001 77002 77003	CPT Text/Definition
62327	77001 77002 77003	CPT Text/Definition
63005	S2350 S2351	CPT/HCPCS Text/Definition
63030	64714	NCCI Policy Manual 2021 Chapter 1 C
63046	63055 63057	NCCI Policy Manual Integral/Incident To

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
63047	20680 22855 63056 63057 64714	NCCI Policy Manual 2021 Chapter IV F Integral/Incident To
63050	22808 22830 22841	Maintain CCI Logic NCCI Policy Chapter IV H
63051	22510 22511 22513 22514 22808 22830 22841	Maintain CCI Logic NCCI Policy Chapter IV H
63056	22857	Maintain CCI Logic
63085	22856	Maintain CCI Logic
63087	22856	Maintain CCI Logic
63090	22856	Maintain CCI Logic
63101	22101 32100 49000 49002 49010 63064 63077 63170	Maintain CCI Logic NCCI Policy Chapter V A CPT Text/Definition
63102	22102 32100 49000 49002 49010 63170	Maintain CCI Logic NCCI Policy Chapter V A CPT Text/Definition
63103	63057 63066 63078 63086 63088 63091	Maintain CCI Logic CPT Text/Definition
63275	20982	NCCI Policy Manual 2021 Chapter I C
63276	20982	NCCI Policy Manual 2021 Chapter I C

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
63277	20982	NCCI Policy Manual 2021 Chapter I C
63278	20982	NCCI Policy Manual 2021 Chapter I C
63280	20982	NCCI Policy Manual 2021 Chapter I C
63281	20982	NCCI Policy Manual 2021 Chapter I C
63282	20982	NCCI Policy Manual 2021 Chapter I C
63283	20982	NCCI Policy Manual 2021 Chapter I C
63285	20982	NCCI Policy Manual 2021 Chapter I C
63286	20982	NCCI Policy Manual 2021 Chapter I C
63287	20982	NCCI Policy Manual 2021 Chapter I C
63290	20982	NCCI Policy Manual 2021 Chapter I C
63300	20982	NCCI Policy Manual 2021 Chapter I C
63301	20982	NCCI Policy Manual 2021 Chapter I C

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
63302	20982	NCCI Policy Manual 2021 Chapter I C
63303	20982	NCCI Policy Manual 2021 Chapter I C
63304	20982	NCCI Policy Manual 2021 Chapter I C
63305	20982	NCCI Policy Manual 2021 Chapter I C
63306	20982	NCCI Policy Manual 2021 Chapter I C
63307	20982	NCCI Policy Manual 2021 Chapter I C
63655	22830	NCCI Policy Manual 2021 Chapter IV H
63661	22830	NCCI Policy Manual 2021 Chapter IV H
63662	22830	NCCI Policy Manual 2021 Chapter IV H
63663	22830	NCCI Policy Manual 2021 Chapter IV H
63664	22830	NCCI Policy Manual 2021 Chapter IV H
63685	22830	NCCI Policy Manual 2021 Chapter IV H

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
63688	22830	NCCI Policy Manual 2021 Chapter IV H
64400	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64402	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64405	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64408	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64410	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
64413	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64415	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64416	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64417	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64418	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64420	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
64421	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64425	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64430	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64435	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64445	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64446	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
64447	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64448	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64449	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64450	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64479	97810 97811 97813 97814	Medicare B News 187 February 2001 Issue
64483	97810 97811 97813 97814	Medicare B News 187 February 2001 Issue
64490	97810 97811 97813 97814	Medicare B News 187 February 2001 Issue
64491	97810 97811 97813 97814	Medicare B News 187 February 2001 Issue

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
64492	97810 97811 97813 97814	Medicare B News Issue 187 February 2001
64493	97810 97811 97813 97814	Medicare B News Issue 187 February 2001
64494	97810 97811 97813 97814	Medicare B News Issue 187 February 2001
64495	97810 97811 97813 97814	Medicare B News Issue 187 February 2001
64505	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64510	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64517	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64520	00420 97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
64530	97810 97811 97813 97814	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64553	61864 61868	Maintain CCI Logic
64555	61864 61868	Maintain CCI Logic
64566	64568 64570	Maintain CCI Logic
64575	61864 61868	Maintain CCI Logic
64580	61864 61868	Maintain CCI Logic
64612	64611	Maintain CCI Logic
64616	S2340 S2341	Maintain CCI Logic CPT/HCPCS Text/Definition
64630	76000	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64640	76000	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64650	64612 64616 64615 69990 76000	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
64653	64612 64616 64615 69990 76000	Medicare LCD #L23692 - Blocks and Destruction of Somatic and Sympathetic Nerves
64795	10030	NCCI Policy Manual 2021 Chapter I C
64809	64818	CPT Text/Definition
65400	65450 S0810	Maintain CCI Logic CPT/HCPCS Text/Definition
65420	65410 65778 65779	Maintain CCI Logic NCCI Policy Chapter I C4
65435	65600	NCCI Policy Manual 2021 Chapter I C
65710	65760 65765 65767	Maintain CCI Logic
65730	65760 65765 65767	Maintain CCI Logic
65750	65760 65765 65767	Maintain CCI Logic
65755	65760 65765 65767	Maintain CCI Logic
65760	67500 S0800	Maintain CCI Logic CPT/HCPCS Text Definition
65765	67500	Maintain CCI Logic
65767	67500	Maintain CCI Logic
65771	67500	Maintain CCI Logic

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
65772	65771	NCCI Policy Manual 2021 Chapter I C
65775	65771	NCCI Policy Manual 2021 Chapter I C
65780	66250 68100 68110 68115 68130 68135 68200 68320 68325 68326 68328 68360	Maintain CCI Logic NCCI Policy Chapter VIII
65781	66250 68100 68115 68130 68135 68200 68320 68325 68326 68328 68360 68371	Maintain CCI Logic NCCI Policy Chapter VIII
65782	66250 68100 68115 68130 68135 68200 68320 68325 68326 68328 68360 68371	Maintain CCI Logic NCCI Policy Chapter VIII
65920	65800	Maintain CCI Logic
66180	00140	NCCI Policy Manual 2021 Chapter I C
66600	66682	NCCI Policy Manual 2021 Chapter I J
66605	66682	NCCI Policy Manual 2021 Chapter I J
66680	66682	NCCI Policy Manual 2021 Chapter I J
66711	66250	CPT Text/Definition
67010	65870	Maintain CCI Logic NCCI Policy Integral/Incident To

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
67225	G0186	Maintain CCI Logic CPT/HCPCS Text/Definition
67346	10030	NCCI Policy Manual 2021 Chapter I C
67412	67413	NCCI Policy Manual 2021 Chapter I H
67415	10030	NCCI Policy Manual 2021 Chapter I C
67420	67400 67405 67413 67414	NCCI Policy Manual 2021 Chapter I H
67430	67400 67405 67412 67414	NCCI Policy Manual 2021 Chapter I H
67440	67400 67412 67413 67414	NCCI Policy Manual 2021 Chapter I H
67445	67400 67405 67412 67413	NCCI Policy Manual 2021 Chapter I H
67450	67405 67412 67413 67414	NCCI Policy Manual 2021 Chapter I H
67810	10030	NCCI Policy Manual 2021 Chapter I C
67840	67810	NCCI Policy Manual 2021 Chapter I C
67850	67810	NCCI Policy Manual 2021 Chapter I C

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
67901	15821 67916 67917 67923 67924	NCCI Policy Manual 2021 Chapter VIII CCI similar pair 15820/15822
67902	15821 67916 67917 67923 67924	NCCI Policy Manual 2021 Chapter VIII CCI similar pair 15820/15822
67903	15821 67916 67917 67923 67924	NCCI Policy Manual 2021 Chapter VIII CCI similar pair 15820/15822
67904	15821 67916 67917 67923 67924	NCCI Policy Manual 2021 Chapter VIII CCI similar pair 15820/15822
67906	15821 67916 67917 67923 67924	NCCI Policy Manual 2021 Chapter VIII CCI similar pair 15820/15822
67908	15821 67916 67923 67924	NCCI Policy Manual 2021 Chapter VIII CCI similar pair 15820/15822
67971	67916 67917 67923 67924	NCCI Policy Manual 2021 Chapter VIII
67973	67916 67917 67923 67924	NCCI Policy Manual 2021 Chapter VIII
67974	67916 67917 67923 67924	NCCI Policy Manual 2021 Chapter VIII

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
67975	67916 67917 67923 67924	NCCI Policy Manual 2021 Chapter VIII
67912	00140 67710 67715 67875 67880 67882	Maintain CCI Logic
67917	67715	NCCI Policy Manual 2021 Chapter 1 J
68100	10030	NCCI Policy Manual 2021 Chapter 1 C
68110	68020	NCCI Policy Manual 2021 Chapter 1 C
68115	68020	NCCI Policy Manual 2021 Chapter 1 C
68130	68020	NCCI Policy Manual 2021 Chapter 1 C
68330	68371	Maintain CCI Logic CPT/HCPCS Text/Defintion
68360	68371	Maintain CCI Logic CPT/HCPCS Text/Defintion
68362	68371	Maintain CCI Logic CPT/HCPCS Text/Defintion
68510	10030	NCCI Policy Manual 2021 Chapter 1 C
68520	68525	NCCI Policy Manual 2021 Chapter 1 C
68525	10030	NCCI Policy Manual 2021 Chapter 1 C

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
68540	68400	NCCI Policy Manual 2021 Chapter 1 C
68550	68400	NCCI Policy Manual 2021 Chapter 1 C
68750	68745	NCCI Policy Manual 2021 Chapter 1 H + L
68761	A4262	Maintain CCI Logic
69100	10030 69000 69005 69020	NCCI Policy Manual 2021 Chapter 1 C
69105	10030 69000 69005 69020	NCCI Policy Manual 2021 Chapter 1 C
69110	10030 69000 69005 69020	NCCI Policy Manual 2021 Chapter 1 C
69120	10030 69000 69005 69020	NCCI Policy Manual 2021 Chapter 1 C
69140	10030 69000 69005 69020	NCCI Policy Manual 2021 Chapter 1 C
69145	10030 69000 69005 69020	NCCI Policy Manual 2021 Chapter 1 C
69150	10030 69000 69005 69020	NCCI Policy Manual 2021 Chapter 1 C
69155	10030 69000 69005 69020	NCCI Policy Manual 2021 Chapter 1 C
69511	95920	NCCI Policy Manual 2021 Chapter IV H

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
69530	95920	NCCI Policy Manual 2021 Chapter IV H
69550	95920	NCCI Policy Manual 2021 Chapter IV H
69552	95920	NCCI Policy Manual 2021 Chapter IV H
69554	95920	NCCI Policy Manual 2021 Chapter IV H
69604	69501 69502 69505 69511	Maintain CCI Logic NCCI Policy Chapter I L NCCI Policy Chapter VIII
69636	69631	Maintain CCI Logic NCCI Policy Chapter VIII E2
69711	69710	Maintain CCI Logic NCCI Policy Chapter I L
69930	92601 92602 92603 92604 92605 92606 92607 92608	Maintain CCI Logic NCCI Policy Chapter I L
70010	96365	Maintain CCI Logic NCCI Policy Chapter IX D
70015	96365	Maintain CCI Logic NCCI Policy Chapter IX D
70200	70190	Maintain CCI Logic NCCI Policy Chapter I H+L
70336	96365	Maintain CCI Logic NCCI Policy Chapter IX D

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
70450	96365	Medicare B News Issue 173 May 1999 NCCI Policy Chapter IX D
70480	96365	Medicare B News Issue 173 May 1999 NCCI Policy Chapter IX D
70486	96365	Medicare B News Issue 173 May 1999 NCCI Policy Chapter IX D
70490	96365	Medicare B News Issue 173 May 1999 NCCI Policy Chapter IX D
70540	96365	Maintain CCI Logic NCCI Policy Chapter IX D
70544	96365	Maintain CCI Logic NCCI Policy Chapter IX D
70547	96365	Maintain CCI Logic NCCI Policy Chapter IX D
70551	96365	Maintain CCI Logic NCCI Policy Chapter IX D
70557	36000 36011 36406 36410 76000 76942 76998 77002 96365	CMS Claim Process Manual Chapter 13 #30. NCCI Policy Chapter IX D

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
70558	36011	CMS Claim Process Manual Chapter 13 #30. NCCI Policy Chapter IX D
70559	36011	CMS Claim Process Manual Chapter 13 #30. NCCI Policy Chapter IX D
71130	71120	Maintain CCI Logic NCCI Policy Chapter I H+L
71250	96365	Medicare B News Issue 173 May 1999 NCCI Policy Chapter IX D
71550	96365	Maintain CCI Logic NCCI Policy Chapter IX D
72125	96365	Medicare B News Issue 173 May 1999 NCCI Policy Chapter IX D
72128	96365	Medicare B News Issue 173 May 1999 NCCI Policy Chapter IX D
72131	96365	Medicare B News Issue 173 May 1999 NCCI Policy Chapter IX D
72141	96365	Maintain CCI Logic NCCI Policy Chapter IX D

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
72146	96365	Maintain CCI Logic Policy Chapter IX D NCCI
72148	96365	Maintain CCI Logic Policy Chapter IX D NCCI
72192	96365	Medicare B News 173 May 1999 NCCI Policy Chapter IX D Issue
72195	96365	Maintain CCI Logic Policy Chapter IX D NCCI
73200	96365 96366 Q9951 Q9953 Q9954	Medicare B News 173 May 1999 Issue
73218	96365	Maintain CCI Logic Policy Chapter IX D NCCI
73221	96365	Maintain CCI Logic Policy Chapter IX D NCCI
73700	96365	Medicare B News 173 May 1999 NCCI Policy Chapter IX D Issue
73718	96365	Maintain CCI Logic Policy Chapter IX D NCCI
73721	96365	Maintain CCI Logic Policy Chapter IX D NCCI
74150	96365	Maintain CCI Logic Policy Chapter IX D NCCI

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
74176	36000 36005 36011 36416 36410 76000	Maintain CCI Logic CPT Text/Definition
74177	36416 76000	Maintain CCI Logic CPT Text/Definition
74178	36416 76000	Maintain CCI Logic CPT Text/Definition
74181	96365	Maintain CCI Logic NCCI Policy Chapter IX D
74430	96365	Maintain CCI Logic NCCI Policy Chapter IX D
74440	96365	Maintain CCI Logic NCCI Policy Chapter IX D
74445	96365	Maintain CCI Logic NCCI Policy Chapter IX D
74450	96365	Maintain CCI Logic NCCI Policy Chapter IX D
74455	96365	Maintain CCI Logic NCCI Policy Chapter IX D
74470	96365	Maintain CCI Logic NCCI Policy Chapter IX D
74485	96365	Maintain CCI Logic NCCI Policy Chapter IX D
75557	96365	Maintain CCI Logic NCCI Policy Chapter IX D

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
75559	96365	Maintain CCI Logic Policy Chapter IX D NCCI
75625	74022 96365	Maintain CCI Logic Policy Chapter IX H3 NCCI Policy Chapter IX D NCCI
75630	74022 96365	Maintain CCI Logic Policy Chapter IX H3 NCCI Policy Chapter IX D NCCI
75635	74022 76380	Maintain CCI Logic Policy Chapter IX H3 NCCI Policy Chapter IX D NCCI
75705	75774	NCCI Policy Manual Integral /
75901	01916 01924 01925 01926 51701 51702 51703 76376 76377	Maintain CCI Logic Text/Definition CPT
75902	01916 01924 01925 01926 51701 51702 51703 75901 76376 76377	Maintain CCI Logic Text/Definition CPT
75942	10030	NCCI Policy Manual 2018 Chapter 1 C9
75956	01925 35201 35206 35226 35261 35266 35286	Maintain CCI Logic TextDefinition CPT
75957	01925 35201 35206 35226 35261 35266 35286	Maintain CCI Logic TextDefinition CPT
75958	01925 35201 35206 35226 35261 35266 35286 75959	Maintain CCI Logic TextDefinition CPT

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
75959	01925 35201 35206 35226 35261 35266 35286	Maintain CCI Logic CPT TextDefinition
75984	96365	Maintain CCI Logic NCCI Policy Chapter IX D
75989	96365 Q9951 Q9553 Q9554	CMS Claim Process Manual Chapter 13 #30.
76376	76380	Medicare B News Issue 173 May 1999
76377	76380	Medicare B News Issue 173 May 1999
76519	76376 76377	CPT/HCPCS Text/Definition
76870	93975 93976	NCCI Policy Manual Incidental / Integral To
76940	36000 36410 96365	Maintain CCI Logic NCCI Policy Chapter IX D
77021	77011	CPT/HCPCS Text/Definition
77077	76380 G0130	Medicare B News Issue 173 May 1999 CPT/HCPCS Text/Definition
77084	96365	Maintain CCI Logic NCCI Policy Chapter IX D
77261	76376 76377	Maintain CCI Logic CPT Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
77262	76376 76377	Maintain CCI Logic CPT Text/Definition
77263	76376 76377	Maintain CCI Logic CPT Text/Definition
77300	76376 76377	Maintain CCI Logic CPT Text/Definition
77321	76376 76377	Maintain CCI Logic CPT Text/Definition
77371	11922 76376 76377	Medicare Carrier Manual #15022D2 Bundled Services CPT Text/Definition
77372	11922 76376 76377	Medicare Carrier Manual #15022D2 Bundled Services CPT Text/Definition
77373	11922 76376 76377	Medicare Carrier Manual #15022D2 Bundled Services CPT Text/Definition
77385	01924 01925 01930 01932 11922 76810 99254 99255	Medicare Carrier Manual #15022D2 Bundled Services CPT Text/Definition
77402	11922	CMS Claim Process Manual Chapter 13 #70. NCCI Policy Chapter IX F

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
77407	11922	CMS Claim Process Manual Chapter 13 #70. NCCI Policy Chapter IX F
77412	11922	CMS Claim Process Manual Chapter 13 #70. NCCI Policy Chapter IX F
77417	11922	CMS Claim Process Manual Chapter 13 #70. NCCI Policy Chapter IX F
77525	77423	Maintain CCI Logic
77750	11922	CMS Claim Process Manual Chapter 13 #70. CPT Text/Definition
77761	11922 S8049	CMS Claim Process Manual Chapter 13 #70. NCCI Policy Chapter IX F
77762	11922 S8049	CMS Claim Process Manual Chapter 13 #70. NCCI Policy Chapter IX F
77763	11922 S8049	CMS Claim Process Manual Chapter 13 #70. NCCI Policy Chapter IX F

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
77770	11922 99202 99203 99204 99205 99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99234 99235 99236 99238 99239 99281 99282 99283 99284 99285 99304 99305 99308 99309 99310 99315 99316 99318 99324 99325 99326 99327 99328 99334 99335 99336 99337 99341 99342 99343 99344 99345 99347 99348 99349 99350 99356 99357 99360 99455 99456 99460 99461 99462 99462 99464 99465 99466 99467 99468 99469 99471 99472 99475 99476 99477 99478 99479 99480 99485 S8049	CMS Claim Process Manual Chapter 13 #70. NCCI Policy Chapter IX F CPT Text/Definition
77771	11922 99202 99203 99204 99205 99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99234 99235 99236 99238 99239 99281 99282 99283 99284 99285 99304 99305 99308 99309 99310 99315 99316 99318 99324 99325 99326 99327 99328 99334 99335 99336 99337 99341 99342 99343 99344 99345 99347 99348 99349 99350 99356 99357 99360 99455 99456 99460 99461 99462 99462 99464 99465 99466 99467 99468 99469 99471 99472 99475 99476 99477 99478 99479 99480 99485 S8049	CMS Claim Process Manual Chapter 13 #70. NCCI Policy Chapter IX F CPT Text/Definition
77772	11922 99202 99203 99204 99205 99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99234 99235 99236 99238 99239 99281 99282 99283 99284 99285 99304 99305 99308 99309 99310 99315 99316 99318 99324 99325 99326 99327 99328 99334 99335 99336 99337 99341 99342 99343 99344 99345 99347 99348 99349 99350 99356 99357 99360 99455 99456 99460 99461 99462 99462 99464 99465 99466 99467 99468 99469 99471 99472 99475 99476 99477 99478 99479 99480 99485 S8049	CMS Claim Process Manual Chapter 13 #70. NCCI Policy Chapter IX F CPT Text/Definition
77778	11922 S8049	CMS Claim Process Manual Chapter 13 #70. NCCI Policy Chapter IX F
77789	11922 S8049	CMS Claim Process Manual Chapter 13 #70. NCCI Policy Chapter IX F

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
77790	11922	CMS Claim Process Manual Chapter 13 #70. NCCI Policy Chapter IX F
78012	90784 99211 99212 99213 99214 99215 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99341 99342 99343 99344 99345 99347 99348 99349 99350 99354 99356	CCI code pairs similar codes 78000-78011
78013	90784 99211 99212 99213 99214 99215 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99341 99342 99343 99344 99345 99347 99348 99349 99350 99354 99356	CCI code pairs similar codes 78000-78011
78014	90784 99211 99212 99213 99214 99215 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99341 99342 99343 99344 99345 99347 99348 99349 99350 99354 99356	CCI code pairs similar codes 78000-78011
78018	78016	Maintain CCI Logic NCCI Policy Chapter I H+L
78020	76376 76377	Medicare B News Issue 173 May 1999 CMS - Carriers Manual Part 3 #15022-B
78351	76376 76377 77077 78350	Maintain CCI Logic NCCI Policy Chapter I C8
78496	76376 76377	Medicare B News Issue 173 May 1999 CMS - Carriers Manual Part 3 #15022-B
78804	77750 77761 77762 77763 77770 77771 77772 77778 77789	Maintain CCI Logic

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
78813	0042T 70460 70470 70481 70482 70487 70488 70491 70492 70496 70498 71260 71270 71275 72126 72127 72129 72130 72132 72133 72191 72193 72194 73201 73202 73206 73701 73702 73706 74160 74170 74175 75635 76380 76497 77011 77012 77013 77014 77077 96366 G0219 G0330 G0331	Maintain CCI Logic CPT/HCPCS Text/Definition
78814	0042T 70460 70470 70481 70482 70487 70488 70491 70492 70496 70498 71260 71270 71275 72126 72127 72129 72130 72132 72133 72191 72193 72194 73201 73202 73206 73701 73702 73706 74160 74170 74175 75635 76380 76497 77011 77012 77013 77014 77077 G0330 G0331	NCCI Policy Manual v 15.3 Chapter IX H13 CPT/HCPCS Text/Definition
78815	0042T 70460 70470 70491 70492 70496 70498 71260 71270 71275 72126 72127 72129 72130 72132 72133 72191 72193 72194 73201 73202 73206 73701 73702 73706 74160 74170 74175 75635 76380 76497 77011 77012 77013 77014 77077 G0330 G0331	NCCI Policy Manual v 15.3 Chapter IX H13 CPT/HCPCS Text/Definition
78816	0042T 70460 70470 70481 70482 70487 70488 70491 70492 70496 70498 71260 71270 71275 72126 72127 72129 72130 72132 72133 72191 72193 72194 73201 73202 73206 73701 73702 73206 74160 74170 74175 75635 76380 76497 77011 77012 77013 77014 77077 G0330 G0331	NCCI Policy Manual v 15.3 Chapter IX H13 CPT/HCPCS Text/Definition
79403	77761 77762 77763 77770 77771 77772 77778 77787 77789	CPT Text/Definition
80047	81506	CCI code pair similar code 82947
80048	81506	CCI code pair similar code 82947
80050	80053 81506 82040 82247 82310 82374 82435 82565 82947 84075 84132 84155 84295 84443 84450 84460 84520 85004 85007 85009 85025 85027 G0306 G0307	Maintain CCI Logic CPT/HCPCS Text/Definition
80053	81506	CCI code pair similar code 82947
80055	85004 85007 85009 85025 85027 86592 86762 86850 86900 86901 87340 G0306 G0307	Maintain CCI Logic CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
80069	81506	CCI code pair similar code 82947
80422	81506	CCI code pair similar code 82947
80430	81506	CCI code pair similar code 82947
80432	81506	CCI code pair similar code 82947
80434	81506	CCI code pair similar code 82947
80435	81506	CCI code pair similar code 82947
81503	86294 86316	NCCI Policy Manual 2021 Chapter X K5 Chapter X
81506	82948 82951	NCCI Policy Manual 2021 Chapter X K5 X CCI code pairs similar code 82947
82107	81510 81511 81512	CPT Text/Definition
82173	81503	CPT Text/Definition
82945	81506	CPT Text/Definition
82952	81506	CCI code pair similar code 82947
82962	81506	CPT Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
83009	78267 78268 83013 83014 87206 87338	Maintain CCI Logic CPT Text/Definition
83700	81503	CPT Text/Definition
84112	S3628	CPT/HCPCS Text/Definition
84302	84295 84300	NCCI Policy Manual 2021 Chapter X
84482	84480	Maintain CCI Logic NCCI Policy Chapter I H
85004	85048	NCCI Policy Manual 2021 Chapter F X
85009	85007	NCCI Policy Manual 2021 Chapter F X
85027	85009	NCCI Policy Manual 2021 Chapter F X
85032	85007 85044 85045	NCCI Policy 2021 Chapter X CCI code pairs similar code 85590
85097	88300 88302 88304 88307 88309	Maintain CCI Logic NCCI Policy Chapter X
85396	85390	NCCI Policy Manual 2021 Chapter X
86702	86701 S3645	Maintain CCI Logic NCCI Policy Chapter I H

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
86703	86701 86702 S3645	Maintain CCI Logic Policy Chapter I H NCCI
86704	86705	CPT Changes 2001
86708	86709	CPT Changes 2001
86803	86804	Maintain CCI Logic Policy Chapter I H NCCI
87149	87631 87632 87633	CCI code pairs similar code 87640
87150	87631 87632 87633	CCI code pairs similar code 87640
87152	87631 87632 87633	NCCI Policy Manual 2021 Chapter X CCI code pairs similar code 87640
87153	87631 87632 87633	CCI code pairs similar code 87640
87172	Q0113	CPT/HCPCS Text/Definition
87177	Q0113	CPT/HCPCS Text/Definition
87210	Q0111 Q0112 Q0114	CPT/HCPCS Text/Definition
87253	87631 87632 87633	NCCI Policy Manual 2021 Chapter X CCI code pairs similar code 87640

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
87641	87631 87632 87633	CCI code pairs similar code 87640
87800	87801	NCCI Policy Manual 2021 Chapter X G
87903	87901 87910 87912	NCCI Policy Manual 2021 Chapter X G
87904	83912	NCCI Policy Manual 2021 Chapter X E
88240	38207	CPT Text/Definition
88241	38208	CPT Text/Definition
88271	83912	NCCI Policy Manual 2021 Chapter X L
88272	83912	NCCI Policy Manual 2021 Chapter X L
88273	83912	NCCI Policy Manual 2021 Chapter X L
88274	83912	NCCI Policy Manual 2021 Chapter X L
88275	83912	NCCI Policy Manual 2021 Chapter X L
88302	88300	NCCI Policy Manual v 15.3 Chapter X H 9 Medicare B News Issue 173 May 1999

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
88304	88300	NCCI Policy Manual v 15.3 Chapter X H 9 Medicare B News Issue 173 May 1999
88305	88300	NCCI Policy Manual v 15.3 Chapter X H 9 Medicare B News Issue 173 May 1999
88307	88300	NCCI Policy Manual v 15.3 Chapter X H 9 Medicare B News Issue 173 May 1999
88309	88300	NCCI Policy Manual v 15.3 Chapter X H 9 Medicare B News Issue 173 May 1999
88321	88112	NCCI Policy Manual 2021 Chapter X H
88323	88112	NCCI Policy Manual 2021 Chapter X H
88325	88112	NCCI Policy Manual 2021 Chapter X H
89240	88240 88241	NCCI Policy Manual 2021 Chapter X

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
89261	89260	Maintain CCI Logic NCCI Policy Chapter I H
89281	89280	NCCI Policy Manual 2021 Chapter X
89291	89280	NCCI Policy Manual 2021 Chapter X
89335	88240 88241	NCCI Policy Manual 2021 Chapter X
89342	88240 88241	NCCI Policy Manual 2021 Chapter X
89343	88240 88241	NCCI Policy Manual 2021 Chapter X
89344	88240 88241	NCCI Policy Manual 2021 Chapter X
89346	88240 88241	NCCI Policy Manual 2021 Chapter X
89352	88240 88241	NCCI Policy Manual 2021 Chapter X
89353	88240 88241	NCCI Policy Manual 2021 Chapter X
89354	88240 88241	NCCI Policy Manual 2021 Chapter X
89356	88240 88241	NCCI Policy Manual 2021 Chapter X

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
90281	90283	Maintain CCI Logic Policy Chapter I L NCCI
90384	90385	Maintain CCI Logic Policy Chapter I L NCCI
90386	90384 90385	Maintain CCI Logic Policy Chapter I L NCCI
90471	96372	Maintain CCI Logic Text/Definition CPT
90473	96372	Maintain CCI Logic Text/Definition CPT
90477	90476	Maintain CCI Logic Policy Chapter I L NCCI
90581	96372	Maintain CCI Logic Text/Definition CPT
90585	96372	Maintain CCI Logic Text/Definition CPT
90586	96372	Maintain CCI Logic Text/Definition CPT
90632	96372	Maintain CCI Logic Text/Definition CPT
90633	96372	Maintain CCI Logic Text/Definition CPT
90634	96372	Maintain CCI Logic Text/Definition CPT

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
90636	96372	Maintain CCI Logic Text/Definition CPT
90647	96372	Maintain CCI Logic Text/Definition CPT
90648	96372	Maintain CCI Logic Text/Definition CPT
90649	96372	Maintain CCI Logic Text/Definition CPT
90650	96372	Maintain CCI Logic Text/Definition CPT
90653	96372	Maintain CCI Logic Text/Definition CPT
90655	96372	Maintain CCI Logic Text/Definition CPT
90656	96372	Maintain CCI Logic Text/Definition CPT
90657	96372	Maintain CCI Logic Text/Definition CPT
90658	96372	Maintain CCI Logic Text/Definition CPT
90660	96372	Maintain CCI Logic Text/Definition CPT
90661	96372	Maintain CCI Logic Text/Definition CPT

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
90662	96372	Maintain CCI Logic Text/Definition CPT
90672	96372	Maintain CCI Logic Text/Definition CPT
90675	96372	Maintain CCI Logic Text/Definition CPT
90676	96372	Maintain CCI Logic Text/Definition CPT
90680	96372	Maintain CCI Logic Text/Definition CPT
90681	96372	Maintain CCI Logic Text/Definition CPT
90690	96372	Maintain CCI Logic Text/Definition CPT
90691	96372	Maintain CCI Logic Text/Definition CPT
90696	96372	Maintain CCI Logic Text/Definition CPT
90698	90723 96372	Maintain CCI Logic Text/Definition CPT
90700	96372	Maintain CCI Logic Text/Definition CPT
90702	96372	Maintain CCI Logic Text/Definition CPT

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
90707	96372	Maintain CCI Logic Text/Definition CPT
90710	96372	Maintain CCI Logic Text/Definition CPT
90713	96372	Maintain CCI Logic Text/Definition CPT
90714	96372	Maintain CCI Logic Text/Definition CPT
90715	96372	Maintain CCI Logic Text/Definition CPT
90716	96372	Maintain CCI Logic Text/Definition CPT
90717	96372	Maintain CCI Logic Text/Definition CPT
90723	90714 90715 96372	Maintain CCI Logic Text/Definition CPT
90732	96372	Maintain CCI Logic Text/Definition CPT
90733	96372	Maintain CCI Logic Text/Definition CPT
90734	96372	Maintain CCI Logic Text/Definition CPT
90736	96372	Maintain CCI Logic Text/Definition CPT

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
90738	96372	Maintain CCI Logic CPT Text/Definition
90739	96372	Maintain CCI Logic CPT Text/Definition
90740	90636 96372 Q3023	Maintain CCI Policy NCCI Policy Chapter I L CPT/HCPCS Text/Definition
90743	90636 96372 Q3021	Maintain CCI Policy NCCI Policy Chapter I L CPT/HCPCS Text/Definition
90744	96372	Maintain CCI Logic CPT Text/Definition
90746	96372 Q3022	Maintain CCI Logic CPT/HCPCS Text/Definition
90747	96372 Q3023	Maintain CCI Logic CPT/HCPCS Text/Definition
90782	99211	Maintain CCI Logic
90783	99211	Maintain CCI Logic
90784	99211	Maintain CCI Logic
90788	99211	Maintain CCI Logic
90748	96372	Maintain CCI Logic CPT Text/Definition
90749	96372	Maintain CCI Logic CPT Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
90785	99485	CCI code pairs similar code 99466
90845	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 S3005	Maintain CCI Logic CPT/HCPCS Text/Definition
90846	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 S3005	Maintain CCI Logic CPT/HCPCS Text/Definition
90847	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 S3005	Maintain CCI Logic CPT/HCPCS Text/Definition
90849	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 S3005	Maintain CCI Logic CPT/HCPCS Text/Definition
90853	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99304 99305 99306 S3005	Maintain CCI Logic CPT/HCPCS Text/Definition
90865	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 S3005	Maintain CCI Logic CPT/HCPCS Text/Definition
90875	S3005	Maintain CCI Logic CPT/HCPCS Text/Definition
90876	90875 S3005	Maintain CCI Logic NCCI Policy Chapter I H+L CPT/HCPCS Text/Definition
90880	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 S3005	Maintain CCI Logic CPT/HCPCS Text/Definition
90899	96150 96151 96152 96153 96154 96155	CPT Text/Definition
90911	G0283	Medicare Part B LMRP Biofeedback Therapy CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
90940	99467 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350	Maintain CCI Logic NCCI Policy Chapter XI Medicare Carrier Manual Transmittal #1776 15350-B
90951	95907 95908 95909 95910 95911 95912 95913 99485	Medicare Part B LMRP NCCI Policy Chapter XI NCCI Policy Chapter I Q CMS Claim Process Manual Chapter 8 ESRD Services CPT/HCPCS Text/Definition
90952	95907 95908 95909 95910 95911 95912 95913 99485	Medicare Part B LMRP NCCI Policy Chapter XI NCCI Policy Chapter I Q CMS Claim Process Manual Chapter 8 ESRD Services CPT/HCPCS Text/Definition
90953	95907 95908 95909 95910 95911 95912 95913 99485	Medicare Part B LMRP NCCI Policy Chapter XI NCCI Policy Chapter I Q CMS Claim Process Manual Chapter 8 ESRD Services CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
90954	95907 95908 95909 95910 95911 95912 95913 99485	Medicare Part B LMRP NCCI Policy Chapter XI NCCI Policy Chapter I Q Medicare Carrier Manual Transmittal #1776 15350-B CPT/HCPCS Text/Definition
90955	95907 95908 95909 95910 95911 95912 95913 99485	Medicare Part B LMRP NCCI Policy Chapter XI NCCI Policy Chapter I Q Medicare Carrier Manual Transmittal #1776 15350-B CPT/HCPCS Text/Definition
90956	95907 95908 95909 95910 95911 95912 95913 99485	Medicare Part B LMRP NCCI Policy Chapter XI NCCI Policy Chapter I Q Medicare Carrier Manual Transmittal #1776 15350-B CPT/HCPCS Text/Definition
90957	95907 95908 95909 95910 95911 95912 95913 99485	Medicare Part B LMRP NCCI Policy Chapter XI NCCI Policy Chapter I Q Medicare Carrier Manual Transmittal #1776 15350-B CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
90958	95907 95908 95909 95910 95911 95912 95913 99485	Medicare Part B LMRP NCCI Policy Chapter XI NCCI Policy Chapter I Q Medicare Carrier Manual Transmittal #1776 15350-B CPT/HCPCS Text/Definition
90959	95907 95908 95909 95910 95911 95912 95913 99485	Medicare Part B LMRP NCCI Policy Chapter XI NCCI Policy Chapter I Q Medicare Carrier Manual Transmittal #1776 15350-B CPT/HCPCS Text/Definition
90960	95907 95908 95909 95910 95911 95912 95913 99485	Medicare Part B LMRP NCCI Policy Chapter XI NCCI Policy Chapter I Q Medicare Carrier Manual Transmittal #1776 15350-B CPT/HCPCS Text/Definition
90961	95907 95908 95909 95910 95911 95912 95913 99485	Medicare Part B LMRP NCCI Policy Chapter XI NCCI Policy Chapter I Q Medicare Carrier Manual Transmittal #1776 15350-B CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
90962	95907 95908 95909 95910 95911 95912 95913 99485	Medicare Part B LMRP NCCI Policy Chapter XI NCCI Policy Chapter I Q Medicare Carrier Manual Transmittal #1776 15350-B CPT/HCPCS Text/Definition
90963	95907 95908 95909 95910 95911 95912 95913 99485	Medicare Part B LMRP NCCI Policy Chapter XI NCCI Policy Chapter I Q CMS Claim Process Manual Chapter 8 ESRD Services CPT/HCPCS Text/Definition
90964	95907 95908 95909 95910 95911 95912 95913 99485	Medicare Part B LMRP NCCI Policy Chapter XI NCCI Policy Chapter I Q Medicare Carrier Manual Transmittal #1776 15350-B CPT/HCPCS Text/Definition
90965	95907 95908 95909 95910 95911 95912 95913 99485	Medicare Part B LMRP NCCI Policy Chapter XI NCCI Policy Chapter I Q Medicare Carrier Manual Transmittal #1776 15350-B CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
90966	95907 95908 95909 95910 95911 95912 95913 99485	Medicare Part B LMRP NCCI Policy Chapter XI NCCI Policy Chapter I Q Medicare Carrier Manual Transmittal #1776 15350-B CPT/HCPCS Text/Definition
90967	95907 95908 95909 95910 95911 95912 95913 99485	Medicare Part B LMRP NCCI Policy Chapter XI NCCI Policy Chapter I Q CMS Claim Process Manual Chapter 8 ESRD Services CPT/HCPCS Text/Definition
90968	95907 95908 95909 95910 95911 95912 95913 99485	Medicare Part B LMRP NCCI Policy Chapter XI NCCI Policy Chapter I Q Medicare Carrier Manual Transmittal #1776 15350-B CPT/HCPCS Text/Definition
90969	95907 95908 95909 95910 95911 95912 95913 99485	Medicare Part B LMRP NCCI Policy Chapter XI NCCI Policy Chapter I Q Medicare Carrier Manual Transmittal #1776 15350-B CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
90970	95907 95908 95909 95910 95911 95912 95913 99485	Medicare Part B LMRP NCCI Policy Chapter XI NCCI Policy Chapter I Q Medicare Carrier Manual Transmittal #1776 15350-B CPT/HCPCS Text/Definition
90989	90993 99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI Medicare Carrier Manual Transmittal #1776 15350-B
90993	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI Medicare Carrier Manual Transmittal #1776 15350-B
90997	99324 99325 99326 99327 99328 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI Medicare Carrier Manual Transmittal #1776 15350-B
90999	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI Medicare Carrier Manual Transmittal #1776 15350-B

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
91110	69990 99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99360 99401 99402 99403 99404 99411 99412 99466 99467 99468 99469 99471 99472 99478 99479 99480	Maintain CCI Logic Policy Chapter XI NCCI
91112	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99334 99347 99348 99349 99350 99360 99401 99402 99403 99404 99411 99412 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	CCI code pairs similar code 91110
92002	0506T 99173 99174 S0620 S0621 S3000	Maintain CCI Logic Policy Chapter XI G CPT/HCPCS Text/Definition NCCI
92004	0506T 99173 99174 S0620 S0621 S3000	Maintain CCI Logic Policy Chapter XI G CPT/HCPCS Text/Definition NCCI
92012	0506T 99173 99174 S0620 S0621 S3000	Maintain CCI Logic Policy Chapter XI G CPT/HCPCS Text/Definition NCCI
92014	0506T 99173 99174 S0620 S0621 S3000	Maintain CCI Logic Policy Chapter XI G CPT/HCPCS Text/Definition NCCI
92015	S0620 S0621	CPT/HCPCS Text/Definition
92018	92225 92226	Maintain CCI Logic Text/Definition CPT

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
92136	76516	CPT Text/Definition
92225	92226	Maintain CCI Logic NCCI Policy Chapter I C8
92230	36221 36222 36223 36224 36225 36226	CCI code pairs similar codes 36200 36215
92235	36221 36222 36223 36224 36225 36226	CCI code pairs similar codes 36200 36215
92287	92235 92286	Maintain CCI Logic NCCI Policy Chapter I C8
92316	92315	Maintain CCI Logic NCCI Policy Chapter I H 4
92502	V5008	CPT/HCPCS Text/Definition
92520	92610 92611	CPT Text/Definition
92526	92610 92611 92612 92613 92615	CPT Text/Definition
92537	92533	Maintain CCI Logic NCCI Policy Chapter I H 5
92538	92533	Maintain CCI Logic NCCI Policy Chapter I H 5
92541	92531	Maintain CCI Logic NCCI Policy Chapter I H 5
92542	92532	Maintain CCI Logic NCCI Policy Chapter I H 5
92544	92534	Maintain CCI Logic NCCI Policy Chapter I H 5

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
92551	V5008	CPT/HCPCS Text/Definition
92557	S0618	CPT/HCPCS Text/Definition
92590	S0618 V5010 V5011	CPT/HCPCS Text/Definition
92591	92590 S0618 V5010 V5011	CPT/HCPCS Text/Definition
92592	92591 V5010 V5011	CPT/HCPCS Text/Definition
92593	92592 V5010 V5011	CPT/HCPCS Text/Definition
92594	92593 V5010 V5011	CPT/HCPCS Text/Definition
92595	92594 V5010 V5011	CPT/HCPCS Text/Definition
92601	69210 92608 99211 99212 99213 99214 99215 99217 99231 99232 99233 99238 99239 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99360 99401 99402 99403 99404 99411 99412 99462 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI S CPT Text/Definition
92602	69210 92608 99211 99212 99213 99214 99215 99217 99231 99232 99233 99238 99239 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99360 99401 99402 99403 99404 99411 99412 99462 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI S CPT Text/Definition
92603	69210 92608 99211 99212 99213 99214 99215 99217 99231 99232 99233 99238 99239 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99360 99401 99402 99403 99404 99411 99412 99462 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI S CPT Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
92604	69210 92608 99211 99212 99213 99214 99215 99217 99231 99232 99233 99238 99239 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99360 99401 99402 99403 99404 99411 99412 99462 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic Policy Chapter XI S Text/Definition NCCI CPT
92607	69210 99211 99212 99213 99214 99215 99217 99231 99232 99233 99238 99239 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99360 99401 99402 99403 99404 99411 99412 99462 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic Policy Chapter XI S Text/Definition NCCI CPT
92609	69210 92608 99211 99212 99213 99214 99215 99217 99231 99232 99233 99238 99239 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99360 99401 99402 99403 99404 99411 99412 99462 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic Policy Chapter XI S Text/Definition NCCI CPT
92610	70370 70371 99211 99212 99213 99214 99215 99217 99231 99232 99233 99238 99239 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99360 99401 99402 99403 99404 99411 99412 99462 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic Policy Chapter XI S Text/Definition NCCI CPT
92611	99211 99212 99213 99214 99215 99217 99231 99232 99233 99238 99239 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99360 99401 99402 99403 99404 99411 99412 99462 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic Policy Chapter XI S Text/Definition NCCI CPT
92612	31231 31505 70370 70371 74230 92613 99211 99212 99213 99214 99215 99217 99231 99232 99233 99238 99239 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99360 99401 99402 99403 99404 99411 99412 99462 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic Policy Chapter XI S Text/Definition NCCI CPT

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
92613	7037026 7037126 7423026 99485	Maintain CCI Logic Text/Definition CPT
92614	31231 31505 70370 70371 74230 92526 92615 99211 99212 99213 99214 99215 99217 99231 99232 99233 99238 99239 99466 99467 99468 99469 99471 99472 99478 99479 99480 99291 99292 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99360 99401 99402 99403 99404 99411 99412 99462 99485	Maintain CCI Logic Policy Chapter XI S Text/Definition NCCI CPT
92615	7037026 7037126 7423026 99485	Maintain CCI Logic Text/Definition CPT
92616	31231 31505 70370 70371 74230 92526 92615 92617 99211 99212 99213 99214 99215 99217 99231 99232 99233 99238 99239 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99360 99401 99402 99403 99404 99411 99412 99462 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic Policy Chapter XI S Text/Definition NCCI CPT
92617	7037026 7037126 7423026 99485	Maintain CCI Logic Text/Definition CPT
92626	92630 92633 99202 99203 99204 99205 99211 99212 99213 99214 99215 V5008	Maintain CCI Logic CPT/HCPCS Text/Definition
92630	69210 92507 99202 99203 99204 99205 99211 99212 99213 99214 99215 V5008	Maintain CCI Logic CPT/HCPCS Text/Definition
92633	69210 92507 99202 99203 99204 99205 99211 99212 99213 99214 99215 V5008	Maintain CCI Logic CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
92700	99211 99212 99213 99214 99215 99217 99231 99232 99233 99238 99239 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99360 99401 99402 99403 99404 99411 99412 99462 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI S CCI edits for code 92599
92924	36221 36222 36223 36224 36225 36226	CCI code pairs similar code 92995
92928	36221 36222 36223 36224 36225 36226	CCI code pairs similar code 92980
92933	36221 36222 36223 36224 36225 36226	CCI code pairs similar code 92980
92937	36221 36222 36223 36224 36225 36226	CCI code pairs similar code 92980
92941	36221 36222 36223 36224 36225 36226	CCI code pairs similar code 92980
92943	36221 36222 36223 36224 36225 36226	CCI code pairs similar code 92980
92986	36221	CCI code pairs similar code 36215
92987	36221	CCI code pairs similar code 36215
93307	78472	Maintain CCI Logic NCCI Policy Chapter I G
93451	36580 36584 92975	Medicare Part B LMRP Cardiology, Interventional

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
93452	36221 92975	Medicare Part B LMRP Cardiology, Interventional CPT/HCPCS Text/Definition
93453	36221 36580 36584 92975	Medicare Part B LMRP Cardiology, Interventional
93454	36221	NCCI Policy Manual Chapter XI I-15
93455	36221	NCCI Policy Manual Chapter XI I-15
93456	36221 36580 36584	Medicare Part B LMRP Cardiology, Interventional
93457	36221 36580 36584	Medicare Part B LMRP Cardiology, Interventional
93458	36221	CCI code pairs similar code 36215
93459	36221	CCI code pairs similar code 36215
93460	36221 36580 36584	Medicare Part B LMRP Cardiology, Interventional
93461	36221 36580 36584	Medicare Part B LMRP Cardiology, Interventional
93503	92975	Medicare Part B LMRP Cardiology, Interventional
93505	92975	Medicare Part B LMRP Cardiology, Interventional

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
93508	92975 G0269	Medicare Part B LMRP Cardiology, Interventional CPT/HCPCS Text/Definition
93580	33735 69990 99360 99401 99402 99403 99404 99411 99412 99462	CPT Text/Definition
93581	33735 69990 99360 99401 99402 99403 99404 99411 99412 99462	CPT Text/Definition
93605	93654	CCI code pair similar code 93652
93618	36580 36584	Maintain CCI Logic
93619	36580 36584	Maintain CCI Logic
93620	36580 36584	Maintain CCI Logic
93621	36580 36584	Maintain CCI Logic
93622	36580 36584	Maintain CCI Logic
93623	36580 36584	Maintain CCI Logic
93624	36580 36584	Maintain CCI Logic
93797	99202 99203 99204 99205	Maintain CCI Logic NCCI Policy Chapter XI I4
93798	99202 99203 99204 99205	Maintain CCI Logic NCCI Policy Chapter XI I4
94010	99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI J+S CPT Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
94014	99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI J+S CPT Text/Definition
94015	99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI J+S CPT Text/Definition
94016	99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI J+S CPT Text/Definition
94060	99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI J+S CPT Text/Definition
94070	99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI J+S CPT Text/Definition
94200	99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI J+S CPT Text/Definition
94375	99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI J+S CPT Text/Definition
94450	99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99485	Maintain CCI Logic NCCI Policy Chapter XI J+S CPT Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
94618	99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485 99486 99498	Maintain CCI Logic NCCI Policy Chapter XI J+S CPT Text/Definition
94621	99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI J+S CPT Text/Definition
94640	99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI J+S CPT Text/Definition
94642	99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI J+S CPT Text/Definition
94664	99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI J+S CPT Text/Definition
94667	99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI J+S CPT Text/Definition
94668	99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI J+S CPT Text/Definition
94680	99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI J+S CPT Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
94681	99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI J+S CPT Text/Definition
94690	99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI J+S CPT Text/Definition
94726	99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI J+S CPT Text/Definition
94727	94150 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI J+S CPT Text/Definition
94762	99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI J+S CPT Text/Definition
94772	99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI J+S CPT Text/Definition
94799	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 99485	Maintain CCI Logic NCCI Policy Chapter XI J+S CPT Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
95125	95120	Maintain CCI Logic NCCI Policy Chapter XI K3+S CPT Text/Definition
95131	95130	Maintain CCI Logic NCCI Policy Chapter I M NCCI Policy Chapter XI K+S CPT Text/Definition
95132	95130 95131	Maintain CCI Logic NCCI Policy Chapter I M NCCI Policy Chapter XI K+S CPT Text/Definition
95133	95130 95131 95132	Maintain CCI Logic NCCI Policy Chapter I M NCCI Policy Chapter XI K+S CPT Text/Definition
95134	95130 95131 95132 95133	Maintain CCI Logic NCCI Policy Chapter I M NCCI Policy Chapter XI K+S CPT Text/Definition
95199	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480	Maintain CCI Logic NCCI Policy Chapter XI S CPT Text/Definition
95250	81506 99091 S1030 S1031	CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
95251	81506 99091 S1030 S1031	CPT/HCPCS Text/Definition
95800	94760 94761 95816 95819 95869 95875	CPT/HCPCS Text/Definition
95801	94760 94761 95816 95819 95869 95875	CPT/HCPCS Text/Definition
95806	94760 94761 95816 95819 95869 95875	CPT/HCPCS Text/Definition
95807	95816 95819 95869 95875	CPT/HCPCS Text/Definition
95808	95869 95875	Maintain CCI Logic CPT/HCPCS Text/Definition
95810	95869 95875	Maintain CCI Logic CPT/HCPCS Text/Definition
95811	95867 95869 95875	Maintain CCI Logic CPT/HCPCS Text/Definition
95860	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480	Medicare Part B LMRP Nerve Conduction Studies and EMG Policy NCCI Policy Manual v 15.3 Chapter XI T
95861	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480	Medicare Part B LMRP Nerve Conduction Studies and EMG Policy NCCI Policy Manual v 15.3 Chapter XI T

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
95863	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480	Medicare Part B LMRP Nerve Conduction Studies and EMG Policy NCCI Policy Manual v 15.3 Chapter XI T
95864	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480	Medicare Part B LMRP Nerve Conduction Studies and EMG Policy NCCI Policy Manual v 15.3 Chapter XI T
95865	99202 99203 99204 99205 99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480	Medicare Part B LMRP Nerve Conduction Studies and EMG Policy NCCI Policy Manual v 15.3 Chapter XI T
95866	99202 99203 99204 99205 99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480	Medicare Part B LMRP Nerve Conduction Studies and EMG Policy NCCI Policy Manual v 15.3 Chapter XI T
95867	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480	Medicare Part B LMRP Nerve Conduction Studies and EMG Policy NCCI Policy Manual v 15.3 Chapter XI T

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
95868	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480	Medicare Part B LMRP Nerve Conduction Studies and EMG Policy NCCI Policy Manual v 15.3 Chapter XI T
95869	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480	Medicare Part B LMRP Nerve Conduction Studies and EMG Policy NCCI Policy Manual v 15.3 Chapter XI T
95870	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480	Medicare Part B LMRP Nerve Conduction Studies and EMG Policy NCCI Policy Manual v 15.3 Chapter XI T
95872	95810 95869 95873 95874 95875 99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480	Medicare Part B LMRP Nerve Conduction Studies and EMG Policy NCCI Policy Manual v 15.3 Chapter XI T
95875	95810 95869 95873 95874 95875 99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480	Medicare Part B LMRP Nerve Conduction Studies and EMG Policy NCCI Policy Manual v 15.3 Chapter XI T

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
95907	0106T 0107T 0108T 0109T 0110T 99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480	CCI code pair similar code 95900
95908	0106T 0107T 0108T 0109T 0110T 99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480	CCI code pair similar code 95900
95909	0106T 0107T 0108T 0109T 0110T 99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480	CCI code pair similar code 95900
95910	0106T 0107T 0108T 0109T 0110T 99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480	CCI code pair similar code 95900
95911	0106T 0107T 0108T 0109T 0110T 99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480	CCI code pair similar code 95900

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
95912	0106T 0107T 0108T 0109T 0110T 99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480	CCI code pair similar code 95900
95913	0106T 0107T 0108T 0109T 0110T 99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480	CCI code pair similar code 95900
95925	0106T 0107T 0108T 0109T 0110T	Maintain CCI Logic CPT Text/Definition
95926	0106T 0107T 0108T 0109T 0110T	Maintain CCI Logic CPT Text/Definition
95927	0106T 0107T 0108T 0109T 0110T	Maintain CCI Logic CPT Text/Definition
95928	0106T 0107T 0108T 0109T 0110T	Maintain CCI Logic CPT Text/Definition
95929	0106T 0107T 0108T 0109T 0110T	Maintain CCI Logic CPT Text/Definition
95990	36400 49010 64415 64417 64450 69990 99211 99212 99213 99214 99215 99217 99231 99232 99233 99238 99239 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99360 99401 99402 99403 99404 99411 99412 99462 99466 99467 99468 99469 99471 99472 99478 99479 99480	NCCI Policy Chapter XI S CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
95991	36400 49010 64415 64417 64450 69990 99211 99212 99213 99214 99215 99217 99231 99232 99233 99238 99239 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99360 99401 99402 99403 99404 99411 99412 99462 99466 99467 99468 99469 99471 99472 99478 99479 99480	NCCI Policy Chapter XI S CPT/HCPCS Text/Definition
96360	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A4206 A4207 A4208 A4209 A4210 A4212 A4213 A4215 A4216 A4218 A4220 A4221 A4222 A4223 A4244 A4245 A4246 A4247 A4248 A4301 A4305 A4306 A4320 A4450 A4452 A4455 A4456 A4649 A4657 A4750 A4755 A4927 A4928 A4930 A6216 A6217 A6218 A6219 A6220 A6221 A6257 A6258 A6260 A6402 A6403 E0779 E0780 J1642	Maintain CCI Logic Practice Expense RVUs
96365	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A4206 A4207 A4208 A4209 A4210 A4212 A4213 A4215 A4216 A4218 A4220 A4221 A4222 A4223 A4244 A4245 A4246 A4247 A4248 A4301 A4305 A4306 A4320 A4450 A4452 A4455 A4456 A4649 A4657 A4750 A4755 A4927 A4928 A4930 A6216 A6217 A6218 A6219 A6220 A6221 A6257 A6258 A6260 A6402 A6403 E0779 E0780 J1642	Maintain CCI Logic Practice Expense RVUs
96369	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A4206 A4207 A4208 A4209 A4210 A4212 A4213 A4215 A4216 A4218 A4220 A4221 A4222 A4223 A4244 A4245 A4246 A4247 A4248 A4301 A4305 A4306 A4320 A4450 A4452 A4455 A4456 A4649 A4657 A4750 A4755 A4927 A4928 A4930 A6216 A6217 A6218 A6219 A6220 A6221 A6257 A6258 A6260 A6402 A6403 E0779 E0780 J1642	Maintain CCI Logic Practice Expense RVUs
96372	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A4206 A4207 A4208 A4209 A4210 A4212 A4213 A4215 A4216 A4218 A4220 A4221 A4222 A4223 A4244 A4245 A4246 A4247 A4248 A4301 A4305 A4306 A4320 A4450 A4452 A4455 A4456 A4649 A4657 A4750 A4755 A4927 A4928 A4930 A6216 A6217 A6218 A6219 A6220 A6221 A6257 A6258 A6260 A6402 A6403 E0779 E0780 J1642	Maintain CCI Logic Practice Expense RVUs

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
96373	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A4206 A4207 A4208 A4209 A4210 A4212 A4213 A4215 A4216 A4218 A4220 A4221 A4222 A4223 A4244 A4245 A4246 A4247 A4248 A4301 A4305 A4306 A4320 A4450 A4452 A4455 A4456 A4649 A4657 A4750 A4755 A4927 A4928 A4930 A6216 A6217 A6218 A6219 A6220 A6221 A6257 A6258 A6260 A6402 A6403 E0779 E0780 J1642	Maintain CCI Logic Practice Expense RVUs
96374	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A4206 A4207 A4208 A4209 A4210 A4212 A4213 A4215 A4216 A4218 A4220 A4221 A4222 A4223 A4244 A4245 A4246 A4247 A4248 A4301 A4305 A4306 A4320 A4450 A4452 A4455 A4456 A4649 A4657 A4750 A4755 A4927 A4928 A4930 A6216 A6217 A6218 A6219 A6220 A6221 A6257 A6258 A6260 A6402 A6403 E0779 E0780 J1642	Maintain CCI Logic Practice Expense RVUs
96401	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A4206 A4207 A4208 A4209 A4210 A4212 A4213 A4215 A4216 A4218 A4220 A4221 A4222 A4223 A4244 A4245 A4246 A4247 A4248 A4301 A4305 A4306 A4320 A4450 A4452 A4455 A4456 A4649 A4657 A4750 A4755 A4927 A4928 A4930 A6216 A6217 A6218 A6219 A6220 A6221 A6257 A6258 A6260 A6402 A6403 E0779 E0780 J1642 Q0084	Maintain CCI Logic Practice Expense RVUs
96402	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A4206 A4207 A4208 A4209 A4210 A4212 A4213 A4215 A4216 A4218 A4220 A4221 A4222 A4223 A4244 A4245 A4246 A4247 A4248 A4301 A4305 A4306 A4320 A4450 A4452 A4455 A4456 A4649 A4657 A4750 A4755 A4927 A4928 A4930 A6216 A6217 A6218 A6219 A6220 A6221 A6257 A6258 A6260 A6402 A6403 E0779 E0780 J1642 Q0084	Maintain CCI Logic Practice Expense RVUs
96405	A4206 A4207 A4208 A4209 A4210 A4212 A4213 A4215 A4216 A4218 A4220 A4221 A4222 A4223 A4244 A4245 A4246 A4247 A4248 A4301 A4305 A4306 A4320 A4450 A4452 A4455 A4456 A4649 A4657 A4750 A4755 A4927 A4928 A4930 A6216 A6217 A6218 A6219 A6220 A6221 A6257 A6258 A6260 A6402 A6403 E0779 E0780 J1642 Q0084	Maintain CCI Logic Practice Expense RVUs

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
96406	A4206 A4207 A4208 A4209 A4210 A4212 A4213 A4215 A4216 A4218 A4220 A4221 A4222 A4223 A4244 A4245 A4246 A4247 A4248 A4301 A4305 A4306 A4320 A4450 A4452 A4455 A4456 A4649 A4657 A4750 A4755 A4927 A4928 A4930 A6216 A6217 A6218 A6219 A6220 A6221 A6257 A6258 A6260 A6402 A6403 E0779 E0780 J1642 Q0084	Maintain CCI Logic Practice Expense RVUs
96409	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A4206 A4207 A4208 A4209 A4210 A4212 A4213 A4215 A4216 A4218 A4220 A4221 A4222 A4223 A4244 A4245 A4246 A4247 A4248 A4301 A4305 A4306 A4320 A4450 A4452 A4455 A4456 A4649 A4657 A4750 A4755 A4927 A4928 A4930 A6216 A6217 A6218 A6219 A6220 A6221 A6257 A6258 A6260 A6402 A6403 E0779 E0780 J1642 Q0081 S1015	Maintain CCI Logic Practice Expense RVUs
96413	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A4206 A4207 A4208 A4209 A4210 A4212 A4213 A4215 A4216 A4218 A4220 A4221 A4222 A4223 A4244 A4245 A4246 A4247 A4248 A4301 A4305 A4306 A4320 A4450 A4452 A4455 A4456 A4649 A4657 A4750 A4755 A4927 A4928 A4930 A6216 A6217 A6218 A6219 A6220 A6221 A6257 A6258 A6260 A6402 A6403 E0779 E0780 J1642 Q0081 Q0083 S1015	Maintain CCI Logic Practice Expense RVUs
96416	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A4206 A4207 A4208 A4209 A4210 A4212 A4213 A4215 A4216 A4218 A4220 A4221 A4222 A4223 A4244 A4245 A4246 A4247 A4248 A4301 A4305 A4306 A4320 A4450 A4452 A4455 A4456 A4649 A4657 A4750 A4755 A4927 A4928 A4930 A6216 A6217 A6218 A6219 A6220 A6221 A6257 A6258 A6260 A6402 A6403 E0779 E0780 J1642 Q0081 Q0083 S1015	Maintain CCI Logic Practice Expense RVUs
96420	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A4206 A4207 A4208 A4209 A4210 A4212 A4213 A4215 A4216 A4218 A4220 A4221 A4222 A4223 A4244 A4245 A4246 A4247 A4248 A4301 A4305 A4306 A4320 A4450 A4452 A4455 A4456 A4649 A4657 A4750 A4755 A4927 A4928 A4930 A6216 A6217 A6218 A6219 A6220 A6221 A6257 A6258 A6260 A6402 A6403 E0779 E0780 J1642 Q0081 Q0083 S1015	Maintain CCI Logic Practice Expense RVUs

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
96422	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A4206 A4207 A4208 A4209 A4210 A4212 A4213 A4215 A4216 A4218 A4220 A4221 A4222 A4223 A4244 A4245 A4246 A4247 A4248 A4301 A4305 A4306 A4320 A4450 A4452 A4455 A4456 A4649 A4657 A4750 A4755 A4927 A4928 A4930 A6216 A6217 A6218 A6219 A6220 A6221 A6257 A6258 A6260 A6402 A6403 E0779 E0780 J1642 Q0081 Q0083 S1015	Maintain CCI Logic Practice Expense RVUs
96425	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A4206 A4207 A4208 A4209 A4210 A4212 A4213 A4215 A4216 A4218 A4220 A4221 A4222 A4223 A4244 A4245 A4246 A4247 A4248 A4301 A4305 A4306 A4320 A4450 A4452 A4455 A4456 A4649 A4657 A4750 A4755 A4927 A4928 A4930 A6216 A6217 A6218 A6219 A6220 A6221 A6257 A6258 A6260 A6402 A6403 E0779 E0780 J1642 Q0081 Q0083	Maintain CCI Logic Practice Expense RVUs
96440	A4206 A4207 A4208 A4209 A4210 A4212 A4213 A4215 A4216 A4218 A4220 A4221 A4222 A4223 A4244 A4245 A4246 A4247 A4248 A4301 A4305 A4306 A4320 A4450 A4452 A4455 A4456 A4649 A4657 A4750 A4755 A4927 A4928 A4930 A6216 A6217 A6218 A6219 A6220 A6221 A6257 A6258 A6260 A6402 A6403 E0779 E0780 J1642	Maintain CCI Logic Practice Expense RVUs
96446	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A4206 A4207 A4208 A4209 A4210 A4212 A4213 A4215 A4216 A4218 A4220 A4221 A4222 A4223 A4244 A4245 A4246 A4247 A4248 A4301 A4305 A4306 A4320 A4450 A4452 A4455 A4456 A4649 A4657 A4750 A4755 A4927 A4928 A4930 A6216 A6217 A6218 A6219 A6220 A6221 A6257 A6258 A6260 A6402 A6403 E0779 E0780 J1642	Maintain CCI Logic Practice Expense RVUs
96450	A4206 A4207 A4208 A4209 A4210 A4212 A4213 A4215 A4216 A4218 A4220 A4221 A4222 A4223 A4244 A4245 A4246 A4247 A4248 A4301 A4305 A4306 A4320 A4450 A4452 A4455 A4456 A4649 A4657 A4750 A4755 A4927 A4928 A4930 A6216 A6217 A6218 A6219 A6220 A6221 A6257 A6258 A6260 A6402 A6403 E0779 E0780 J1642	Maintain CCI Logic Practice Expense RVUs

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
96521	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A4206 A4207 A4208 A4209 A4210 A4212 A4213 A4215 A4216 A4218 A4220 A4221 A4222 A4223 A4244 A4245 A4246 A4247 A4248 A4301 A4305 A4306 A4320 A4450 A4452 A4455 A4456 A4649 A4657 A4750 A4755 A4927 A4928 A4930 A6216 A6217 A6218 A6219 A6220 A6221 A6257 A6258 A6260 A6402 A6403 E0779 E0780 J1642	Maintain CCI Logic Practice Expense RVUs
96522	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A4206 A4207 A4208 A4209 A4210 A4212 A4213 A4215 A4216 A4218 A4220 A4221 A4222 A4223 A4244 A4245 A4246 A4247 A4248 A4301 A4305 A4306 A4320 A4450 A4452 A4455 A4456 A4649 A4657 A4750 A4755 A4927 A4928 A4930 A6216 A6217 A6218 A6219 A6220 A6221 A6257 A6258 A6260 A6402 A6403 E0779 E0780 J1642	Maintain CCI Logic Practice Expense RVUs
96523	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A4206 A4207 A4208 A4209 A4210 A4212 A4213 A4215 A4216 A4218 A4220 A4221 A4222 A4223 A4244 A4245 A4246 A4247 A4248 A4301 A4305 A4306 A4320 A4450 A4452 A4455 A4456 A4649 A4657 A4750 A4755 A4927 A4928 A4930 A6216 A6217 A6218 A6219 A6220 A6221 A6257 A6258 A6260 A6402 A6403 E0779 E0780 J1642	Maintain CCI Logic Practice Expense RVUs
96542	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A4206 A4207 A4208 A4209 A4210 A4212 A4213 A4215 A4216 A4218 A4220 A4221 A4222 A4223 A4244 A4245 A4246 A4247 A4248 A4301 A4305 A4306 A4320 A4450 A4452 A4455 A4456 A4649 A4657 A4750 A4755 A4927 A4928 A4930 A6216 A6217 A6218 A6219 A6220 A6221 A6257 A6258 A6260 A6402 A6403 E0779 E0780 J1642	Maintain CCI Logic Practice Expense RVUs

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
96549	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A4206 A4207 A4208 A4209 A4210 A4212 A4213 A4215 A4216 A4218 A4220 A4221 A4222 A4223 A4244 A4245 A4246 A4247 A4248 A4301 A4305 A4306 A4320 A4450 A4452 A4455 A4456 A4649 A4657 A4750 A4755 A4927 A4928 A4930 A6216 A6217 A6218 A6219 A6220 A6221 A6257 A6258 A6260 A6402 A6403 E0779 E0780 J1642	Maintain CCI Logic NCCI Policy Chapter XI S Practice Expense RVUs
96567	A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List
96900	A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
96910	A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List
96912	A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List
96913	A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
96920	A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List
96921	A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List
96922	A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97161	99202 99203 99204 99205 99211 99212 99213 99214 99215 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List
97162	99202 99203 99204 99205 99211 99212 99213 99214 99215 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97163	99202 99203 99204 99205 99211 99212 99213 99214 99215 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List
97164	99202 99203 99204 99205 99211 99212 99213 99214 99215 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97165	99202 99203 99204 99205 99211 99212 99213 99214 99215 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List
97166	99202 99203 99204 99205 99211 99212 99213 99214 99215 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97167	99202 99203 99204 99205 99211 99212 99213 99214 99215 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List
97168	99202 99203 99204 99205 99211 99212 99213 99214 99215 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97169	97172 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List
97170	97169 97172 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List
97171	97169 97170 97172 99202 99203 99204 99205 99211 99212 99213 99214 99215 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97172	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List
97012	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97014	97032 99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List
97016	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97018	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List
97022	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97024	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List
97026	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97028	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List
97032	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97033	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List
97034	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97035	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List
97036	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97039	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List
97110	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97112	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List
97113	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97116	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List
97124	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97127	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List
97139	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97140	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List
97150	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97530	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List
97533	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97535	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List
97537	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97542	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List
97597	99324 99325 99326 99327 99328 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97598	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List
97602	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97605	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List
97606	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97760	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97761	29044 29046 29049 29055 29058 29065 29075 29085 29105 29125 29126 29130 29131 29200 29240 29260 29280 29305 29325 29345 29355 29358 29365 29405 29425 29435 29440 29445 29450 29505 29515 29520 29530 29540 29550 29580 29700 29705 29710 29720 29730 29740 29750 99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List
97802	99078 S9140 S9141 S9455 S9460 S9465 S9470	Maintain CCI Logic NCCI Policy Chapter I H CPT/HCPCS Text/Definition
97803	99078 S9140 S9141 S9455 S9460 S9465 S9470	Maintain CCI Logic NCCI Policy Chapter I H CPT/HCPCS Text/Definition
97804	99078 S9140 S9141 S9455 S9460 S9465 S9470	Maintain CCI Logic NCCI Policy Chapter I H CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
97810	97012 97014 97016 97018 97022 97024 97026 97028 97032 97033 97034 97035 97036 97110 97112 97113 97116 97124 97140 97150 97530 97532 97533 97535 97537 97542 97750 97760 97761 97763 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6543 A6454 A6455 A6456	Maintain CCI Logic NCCI Policy Chapter XI T CPT/HCPCS Text/Definition
97813	97012 97014 97016 97018 97022 97024 97026 97028 97032 97033 97034 97035 97036 97110 97112 97113 97116 97124 97140 97150 97530 97532 97533 97535 97537 97542 97750 97760 97761 97763 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6543 A6454 A6455 A6456	Maintain CCI Logic NCCI Policy Chapter XI T CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
98925	A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6543 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List
98926	A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6543 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List
98927	A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6543 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
98928	A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6543 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List
98929	A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6543 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List
98940	A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6543 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
98941	A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6543 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List
98942	A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6543 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List
98943	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6543 A6454 A6455 A6456	CMS Status Indicator "P" NCCI Policy Chapter XI T Medicare B News #197 Medicare B News #203 Jurisdiction List
99195	96365	Maintain CCI Logic NCCI Policy Chapter IX D

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99202	99174 99177 99231 99232 99238 99241 99251 99281 99282 99283 99401 99402 99403 99404 99411 99412 99460 99462 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List
99202	A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 G0168 S0610 S0612 S0613 S3005	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99203	99174 99177 99217 99231 99232 99233 99238 99241 99242 99251 99252 99281 99282 99283 99284 99401 99402 99403 99404 99411 99412 99460 99462 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List
99203	A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 G0168 S0610 S0612 S0613 S3005	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99204	99174 99177 99217 99231 99232 99233 99238 99241 99242 99243 99251 99252 99253 99281 99282 99283 99284 99401 99402 99403 99404 99411 99412 99460 99462 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4665 A4470 A4480 A4481 A4556	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List
99204	A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 G0168 S0610 S0612 S0613 S3005	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99205	99174 99177 99217 99223 99231 99232 99233 99238 99241 99242 99243 99244 99251 99252 99253 99254 99281 99282 99283 99284 99285 99401 99402 99403 99404 99411 99412 99460 99462 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List
99205	A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 G0168 S0610 S0612 S0613 S3005	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99211	96379 99174 99177 99238 99281 99401 99402 99403 99404 99411 99412 99462 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List
99211	A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 G0168 S0610 S0612 S0613 S3005	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99212	99174 99177 99231 99238 99251 99281 99282 99401 99402 99403 99404 99411 99412 99462 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List
99212	A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0610 S0612 S0613 S3005	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99213	99174 99177 99231 99238 99241 99251 99401 99402 99403 99404 99411 99412 99462 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List
99213	A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0610 S0612 S0613 S3005	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99214	99174 99177 99217 99231 99232 99233 99238 99241 99251 99252 99281 99282 99283 99401 99402 99403 99404 99411 99412 99460 99462 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List
99214	A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0610 S0612 S0613 S3005	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99215	99174 99177 99217 99231 99232 99233 99238 99241 99242 99251 99252 99253 99281 99282 99283 99284 99401 99402 99403 99404 99411 99412 99460 99462 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List
99215	A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0610 S0612 S0613 S3005	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99217	99202 99211 99212 99213 99231 99232 99238 99251 99354 99355 99356 99357 99401 99402 99403 99404 99411 99412 99460 99462 S0613 S3005	Maintain CCI Logic NCCI Policy Chapter XI T Medicare Carriers Manual Section B #15010 CPT Assistant Sept 2000
99218	99224 99225 99226 99231 99232 99241 99245 9925199354 99355 99357 99460 99462 S0613 S3005	Maintain CCI Logic NCCI Policy Chapter XI T Medicare Carriers Manual Section B #15010 CPT Assistant Sept 2000
99219	99231 99232 99233 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99354 99355 99357 99460 99462 S0613 S3005	Maintain CCI Logic NCCI Policy Chapter XI T Medicare Carriers Manual Section B #15010 CPT Assistant Sept 2000
99220	99231 99232 99233 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99354 99355 99357 99460 99462 S0613 S3005	Maintain CCI Logic NCCI Policy Chapter XI T Medicare Carriers Manual Section B #15010 CPT Assistant Sept 2000
99221	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 S0613 S3005	Medicare Carriers Manual Section B #15010 Maintain CCI Logic NCCI Policy Chapter XI T

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99222	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 S0613 S3005	Medicare Carriers Manual Section B #15010 Maintain CCI Logic NCCI Policy Chapter XI T
99223	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 S0613 S3005	Medicare Carriers Manual Section B #15010 Maintain CCI Logic NCCI Policy Chapter XI T
99224	99460 99462 G0168 S0613 S3005	Medicare Carriers Manual Section B #15010 Maintain CCI Logic NCCI Policy Chapter XI T
99225	99401 99402 99403 99404 99411 99412 G0168 S0613 S3005	Medicare Carriers Manual Section B #15010 Maintain CCI Logic NCCI Policy Chapter XI T
99226	99401 99402 99403 99404 99411 99412 G0168 S0613 S3005	Medicare Carriers Manual Section B #15010 Maintain CCI Logic NCCI Policy Chapter XI T
99231	99211 99224 99225 99226 99401 99402 99403 99404 99411 99412 S0613 S3005	Medicare Carriers Manual Section B #15010 Maintain CCI Logic NCCI Policy Chapter XI T

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99232	99211 99212 99213 99224 99225 99226 99241 99251 99307 99401 99402 99403 99404 99411 99412 S0613 S3005	Medicare Carriers Manual Section B #15010 Maintain CCI Logic NCCI Policy Chapter XI T
99233	99202 99211 99212 99213 99217 99218 99224 99225 99226 99241 99251 99252 99304 99307 99308 99315 99401 99402 99403 99404 99411 99412 99431 S0613 S3005	Medicare Carriers Manual Section B #15010 Maintain CCI Logic NCCI Policy Chapter XI T
99234	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99315 99316 99354 99355 99357 99401 99402 99403 99404 99411 99412 99460 99462 99463 S0613 S3005	Maintain CCI Logic NCCI Policy Chapter XI T Medicare Carriers Manual Section B #15010 CPT Assistant Sept 2000
99235	99234 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99315 99316 99354 99355 99357 99401 99402 99403 99404 99411 99412 99460 99462 99463 S0613 S3005	Maintain CCI Logic NCCI Policy Chapter XI T Medicare Carriers Manual Section B #15010 CPT Assistant Sept 2000
99236	99234 99235 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99315 99316 99401 99402 99403 99404 99411 99412 99460 99462 99463 S0613 S3005	Maintain CCI Logic NCCI Policy Chapter XI T Medicare Carriers Manual Section B #15010 CPT Assistant Sept 2000

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99238	99218 99224 99225 99226 99251 99281 99282 99283 99401 99402 99403 99404 99411 99412 99460 S0613 S3005	Medicare Carriers Manual Section B #15010 Maintain CCI Logic NCCI Policy Chapter XI T
99239	99218 99224 99225 99226 99241 99251 99252 99304 99307 99308 99309 99310 99315 99316 99401 99402 99403 99404 99411 99412 99460 99462 99463 S0613 S3005	Medicare Carriers Manual Section B #15010 Maintain CCI Logic NCCI Policy Chapter XI T
99241	90940 92002 92004 92012 92014 92531 92532 95831 95832 95833 95834 95851 95852 96020 96116 96150 96151 96152 96153 96154 97802 97803 97804 99174 99211 99212 99217 99224 99225 99226 99231 99238 99281 99282 99401 99402 99403 99404 99411 99412 99605 99606 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Jurisdiction List NCCI Policy Chapter XI T

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99241	A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 G0102 G0117 G0118 G0245 G0246 G0248 G0250 G0270 G0271 G0337 S0613 S3005	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99242	90940 92002 92004 92012 92014 92531 92532 95831 95832 95833 95834 95851 95852 96020 96116 96150 96151 96152 96153 96154 97802 97803 97804 99174 99202 99211 99212 99213 99214 99217 99224 99225 99226 99231 99232 99233 99238 99239 99281 99282 99401 99402 99403 99404 99411 99412 99460 99462 99605 99606 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Jurisdiction List NCCI Policy Chapter XI T

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99242	A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 G0102 G0117 G0118 G0245 G0246 G0248 G0250 G0270 G0271 G0337 S0613 S3005	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99243	90940 92002 92004 92012 92014 92531 92532 95831 95832 95833 95834 95851 95852 96020 96116 96150 96151 96152 96153 96154 97802 97803 97804 99174 99202 99203 99211 99212 99213 99214 99215 99217 99224 99225 99226 99231 99232 99233 99238 99239 99241 99242 99281 99282 99283 99284 99401 99402 99403 99404 99411 99412 99460 99462 99605 99606 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Jurisdiction List NCCI Policy Chapter XI T

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99243	A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 G0102 G0117 G0118 G0245 G0246 G0248 G0250 G0270 G0271 G0337 S0613 S3005	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99244	90940 92002 92004 92012 92014 92531 92532 95831 95832 95833 95834 95851 95852 96020 96116 96150 96151 96152 96153 96154 97802 97803 97804 99174 99202 99203 99204 99211 99212 99213 99214 99215 99217 99224 99225 99226 99231 99232 99233 99238 99239 99241 99242 99243 99281 99282 99283 99284 99285 99401 99402 99403 99404 99411 99412 99460 99462 99605 99606 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Jurisdiction List NCCI Policy Chapter XI T

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99244	A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 G0102 G0117 G0118 G0245 G0246 G0248 G0250 G0270 G0271 G0337 S0613 S3005	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99245	90940 92002 92004 92012 92014 92531 92532 95831 95832 95833 95834 95851 95852 96020 96116 96150 96151 96152 96153 96154 97802 97803 97804 99174 99202 99203 99204 99205 99211 99212 99213 99214 99215 99217 99224 99225 99226 99231 99232 99233 99238 99239 99241 99242 99243 99244 99281 99282 99283 99284 99285 99401 99402 99403 99404 99411 99412 99460 99462 99605 99606 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Jurisdiction List NCCI Policy Chapter XI T

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99245	A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 G0102 G0117 G0118 G0245 G0246 G0248 G0250 G0270 G0271 G0337 S0613 S3005	Medicare Carriers Manual Section B #15010 CMS Status Indicator "P" Medicare B News #197 Medicare B News #203 Jurisdiction List
99251	90940 92002 92004 92012 92014 92531 92532 94644 95831 95832 95833 95834 95851 95852 96020 96116 96150 96151 96152 96153 96154 97802 97803 97804 99211 99224 99225 99226 99231 99281 99282 99401 99402 99403 99404 99411 99412 99605 99606 99462 G0102 G0245 G0246 G0270 G0271 S0613 S3005	Medicare Carriers Manual Section B #15010 Maintain CCI Logic Policy Chapter XI T NCCI
99252	90940 92002 92004 92012 92014 92531 92532 94644 95831 95832 95833 95834 95851 95852 96020 96116 96150 96151 96152 96153 96154 97802 97803 97804 99202 99211 99212 99213 99217 99218 99224 99225 99226 99231 99232 99238 99251 99281 99282 99283 99307 99308 99315 99401 99402 99403 99404 99411 99412 99460 99462 99605 99606 G0102 G0245 G0246 G0270 G0271 S0613 S3005	Medicare Carriers Manual Section B #15010 Maintain CCI Logic Policy Chapter XI T NCCI

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99253	90940 92002 92004 92012 92014 92531 92532 94644 95831 95832 95833 95834 95851 95852 96020 96116 96150 96151 96152 96153 96154 97802 97803 97804 99202 99203 99211 99212 99213 99214 99217 99218 99224 99225 99226 99231 99232 99233 99238 99239 99251 99252 99281 99282 99283 99284 99307 99308 99309 99310 99315 99316 99401 99402 99403 99404 99411 99412 99460 99462 99605 99606 G0102 G0245 G0246 G0270 G0271 S0613 S3005	Medicare Carriers Manual Section B #15010 Maintain CCI Logic Policy Chapter XI T NCCI
99254	90940 92002 92004 92012 92014 92531 92532 94644 95831 95832 95833 95834 95851 95852 96020 96116 95150 96151 96152 96153 96154 97802 97803 97804 99202 99203 99204 99211 99212 99213 99214 99215 99217 99218 99219 99224 99225 99226 99231 99232 99233 99238 99239 99251 99252 99253 99281 99282 99283 99284 99304 99305 99306 99307 99308 99309 99310 99315 99316 99401 99402 99403 99404 99411 99412 99460 99462 99605 99606 G0102 G0245 G0246 G0270 G0271 S0613 S3005	Medicare Carriers Manual Section B #15010 Maintain CCI Logic Policy Chapter XI T NCCI
99255	90940 92002 92004 92012 92014 92531 92532 94644 95831 95832 95833 95834 95851 95852 96020 96116 96150 96151 96152 96153 96154 97802 97803 97804 99202 99203 99204 99205 99211 99212 99213 99214 99215 99217 99218 99219 99220 99224 99225 99226 99231 99232 99233 99238 99239 99251 99252 99253 99254 99307 99308 99309 99310 99315 99316 99401 99402 99403 99404 99411 99412 99460 99462 99605 99606 G0102 G0245 G0246 G0270 G0271 S0613 S3005	Medicare Carriers Manual Section B #15010 Maintain CCI Logic Policy Chapter XI T NCCI

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99281	7110026 7110126 7111026 7111126 7112026 7113026 7125026 7126026 7127026 7127526 7155026 7155126 7155226 7155526 7202026 7204026 7205026 7205226 7207026 7207226 7207426 7208026 7208126 7208226 7208326 7208426 7210026 7211026 7221426 7212026 7212526 7212626 7212726 7212826 7212926 7213026 7213126 7213226 7213326 7214126 7214226 7214626 7214726 7214826 7214926 7215626 7215726 7215826 7215926 7217026 7219026 7219126 7219226 7219326 7219426 7219526 7219626 7219726 7219826 7220026 7220226 7222026 7224026 7225526 7226526 7227026 7228526 7229526 7300026 7301026 7302026 7303026 7304026 7305026 7306026 7307026 7308026 7308526 7309026 7309226	Final Rule- FR 12-8-1995 Medicare Written Policy Medicare Claims Processing Manual Chapter 13 #100.1
99281	7310026 7311026 7311526 7312026 7313026 7314026 7320026 7320126 7320226 7320626 7321826 7321926 7322026 7322126 7322226 7322326 7322526 7350126 7350226 7350326 7352126 7352226 7352326 7352526 7355126 7355226 7356026 7356226 7356426 7356526 7358026 7359026 7359226 7360026 7361026 7361526 7362026 7363026 7365026 7366026 7370026 7370126 7370226 7370626 7371826 7371926 7372026 7372126 7372226 7372326 7372526 7302226 7415026 7416026 7417026 7417526 7418126 7418226 7418326 7418526 7419026 7421026 7422026 7423026 7423526 7424026 7424126 7424526 7424626 7424726 7424926 7425026 7425126 7426026 7427026 7428026 7428326 7429026 7440026 7441026 7441526 7442026 7442526 7443026 7444026	Final Rule- FR 12-8-1995 Medicare Written Policy Medicare Claims Processing Manual Chapter 13 #100.1

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99281	7444526 7445026 7445526 7447026 7471026 7474026 7555726 7555926 7556126 7556326 7560026 7560526 7562526 7601026 7608026 7610026 7612026 7650626 7651126 7651226 7651326 7651626 7651926 7652926 7653626 7664126 7664226 7670026 7677026 7677526 7677626 7680026 7680526 7681026 7681526 7681626 7681826 7681926 7682526 7682726 7682826 7683026 7683126 7685626 7685726 7687026 7687226 7687326 7688126 7688226 7688526 7688626 7697526 7697726 7705326 7705426 7707126 7707226 7707326 7707426 7707526 7707626 7707726 7707826 7708026 7229226 7801526 7801626 7801826 7807026 7807526 7820126 7820226 7820526 7820626 7821526 7821626	Final Rule- FR 12-8-1995 Medicare Written Policy Medicare Claims Processing Manual Chapter 13 #100.1
99281	7823026 7823126 7823226 7825826 7826126 7826226 7826426 7830026 7830526 7830626 7831526 7832026 7835026 7860026 7860126 7860526 7860626 7860726 7860826 7860926 7861026 7863026 7863526 7864526 7864726 7870026 7870126 7870726 7870826 7870926 7871026 7872526 7873026 7874026 7876026 7876126 93014 93018 93042 99224 93227 93272 99354 99355 99356 99357 99401 99402 99403 99404 99411 99412 G0168 S0613 S3005	FR Final Rule- 12-8-1995 Medicare Written Policy NCCI Policy Chapter XI CPT Assistant Sept 2002
99282	7110026 7110126 7111026 7111126 7112026 7113026 7125026 7126026 7127026 7127526 7155026 7155126 7155226 7155526 7202026 7204026 7205026 7205226 7207026 7207226 7207426 7208026 7208126 7208226 7208326 7208426 7210026 7211026 7221426 7212026 7212526 7212626 7212726 7212826 7212926 7213026 7213126 7213226 7213326 7214126 7214226 7214626 7214726 7214826 7214926 7215626 7215726 7215826 7215926 7217026 7219026 7219126 7219226 7219326 7219426 7219526 7219626 7219726 7219826 7220026 7220226 7222026 7224026 7225526 7226526 7227026 7228526 7229526 7300026 7301026 7302026 7303026 7304026 7305026 7306026 7307026 7308026 7308526 7309026 7309226	Final Rule- FR 12-8-1995 Medicare Written Policy Medicare Claims Processing Manual Chapter 13 #100.1

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99282	7310026 7311026 7311526 7312026 7313026 7314026 7320026 7320126 7320226 7320626 7321826 7321926 7322026 7322126 7322226 7322326 7322526 7350126 7350226 7350326 7352126 7352226 7352326 7352526 7355126 7355226 7356026 7356226 7356426 7356526 7358026 7359026 7359226 7360026 7361026 7361526 7362026 7363026 7365026 7366026 7370026 7370126 7370226 7370626 7371826 7371926 7372026 7372126 7372226 7372326 7372526 7302226 7415026 7416026 7417026 7417526 7418126 7418226 7418326 7418526 7419026 7421026 7422026 7423026 7423526 7424026 7424126 7424526 7424626 7424726 7424926 7425026 7425126 7426026 7427026 7428026 7428326 7429026 7440026 7441026 7441526 7442026 7442526 7443026 7444026	Final Rule- FR 12-8-1995 Medicare Written Policy Medicare Claims Processing Manual Chapter 13 #100.1
99282	7444526 7445026 7445526 7447026 7471026 7474026 7555726 7555926 7556126 7556326 7560026 7560526 7562526 7601026 7608026 7610026 7650626 7651126 7651226 7651326 7651626 7651926 7652926 7653626 7664126 7664226 7670026 7677026 7677526 7677626 7680026 7680526 7681026 7681526 7681626 7681826 7681926 7682526 7682726 7682826 7683026 7683126 7685626 7685726 7687026 7687226 7687326 7688126 7688226 7688526 7688626 7697526 7697726 7705326 7705426 7707126 7707226 7707326 7707426 7707526 7707626 7707726 7707826 7708026 7229226 7801526 7801626 7801826 7807026 7807526 7820126 7820226 7820526 7820626 7821526 7821626	Final Rule- FR 12-8-1995 Medicare Written Policy Medicare Claims Processing Manual Chapter 13 #100.1
99282	7823026 7823126 7823226 7825826 7826126 7826226 7826426 7830026 7830526 7830626 7831526 7832026 7835026 7860026 7860126 7860526 7860626 7860726 7860826 7860926 7861026 7863026 7863526 7864526 7864726 7870026 7870126 7870726 7870826 7870926 7871026 7872526 7873026 7874026 7876026 7876126 93014 93018 93042 93224 93227 93272 99354 99355 99356 99357 99401 99402 99403 99404 99411 99412 G0168 S0613 S3005	FR Final Rule- FR 12-8-1995 Medicare Written Policy CPT Assistant Sept 2002 Maintain CCI Logic NCCI Policy Chapter XI T

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99283	7110026 7110126 7111026 7111126 7112026 7113026 7125026 7126026 7127026 7127526 7155026 7155126 7155226 7155526 7202026 7204026 7205026 7205226 7207026 7207226 7207426 7208026 7208126 7208226 7208326 7208426 7210026 7211026 7221426 7212026 7212526 7212626 7212726 7212826 7212926 7213026 7213126 7213226 7213326 7214126 7214226 7214626 7214726 7214826 7214926 7215626 7215726 7215826 7215926 7217026 7219026 7219126 7219226 7219326 7219426 7219526 7219626 7219726 7219826 7220026 7220226 7222026 7224026 7225526 7226526 7227026 7228526 7229526 7300026 7301026 7302026 7303026 7304026 7305026 7306026 7307026 7308026 7308526 7309026 7309226	Final Rule- FR 12-8-1995 Medicare Written Policy Medicare Claims Processing Manual Chapter 13 #100.1
99283	7310026 7311026 7311526 7312026 7313026 7314026 7320026 7320126 7320226 7320626 7321826 7321926 7322026 7322126 7322226 7322326 7322526 7350126 7350226 7350326 7352126 7352226 7352326 7352526 7355126 7355226 7356026 7356226 7356426 7356526 7358026 7359026 7359226 7360026 7361026 7361526 7362026 7363026 7365026 7366026 7370026 7370126 7370226 7370626 7371826 7371926 7372026 7372126 7372226 7372326 7372526 7302226 7415026 7416026 7417026 7417526 7418126 7418226 7418326 7418526 7419026 7421026 7422026 7423026 7423526 7424026 7424126 7424526 7424626 7424726 7424926 7425026 7425126 7426026 7427026 7428026 7428326 7429026 7440026 7441026 7441526 7442026 7442526 7443026 7444026	Final Rule- FR 12-8-1995 Medicare Written Policy Medicare Claims Processing Manual Chapter 13 #100.1

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99283	7444526 7445026 7445526 7447026 7471026 7474026 7555726 7555926 7556126 7556326 7560026 7560526 7562526 7601026 7608026 7610026 7612026 7650626 7651126 7651226 7651326 7651626 7651926 7652926 7653626 7664126 7664226 7670026 7677026 7677526 7677626 7680026 7680526 7681026 7681526 7681626 7681826 7681926 7682526 7682726 7682826 7683026 7683126 7685626 7685726 7687026 7687226 7687326 7688126 7688226 7688526 7688626 7697526 7697726 7705326 7705426 7707126 7707226 7707326 7707426 7707526 7707626 7707726 7707826 7708026 7229226 7801526 7801626 7801826 7807026 7807526 7820126 7820226 7820526 7820626 7821526 7821626	Final Rule- FR 12-8-1995 Medicare Written Policy Medicare Claims Processing Manual Chapter 13 #100.1
99283	7823026 7823126 7823226 7825826 7826126 7826226 7826426 7830026 7830526 7830626 7831526 7832026 7835026 7860026 7860126 7860526 7860626 7860726 7860826 7860926 7861026 7863026 7863526 7864526 7864726 7870026 7870126 7870726 7870826 7870926 7871026 7872526 7873026 7874026 7876026 7876126 93014 93018 93042 93224 93227 93272 99354 99355 99356 99357 99401 99402 99403 99404 99411 99412 G0168 S0613 S3005	FR Final Rule- FR 12-8-1995 Medicare Written Policy CPT Assistant Sept 2002 Maintain CCI Logic NCCI Policy Chapter XI T
99284	7110026 7110126 7111026 7111126 7112026 7113026 7125026 7126026 7127026 7127526 7155026 7155126 7155226 7155526 7202026 7204026 7205026 7205226 7207026 7207226 7207426 7208026 7208126 7208226 7208326 7208426 7210026 7211026 7221426 7212026 7212526 7212626 7212726 7212826 7212926 7213026 7213126 7213226 7213326 7214126 7214226 7214626 7214726 7214826 7214926 7215626 7215726 7215826 7215926 7217026 7219026 7219126 7219226 7219326 7219426 7219526 7219626 7219726 7219826 7220026 7220226 7222026 7224026 7225526 7226526 7227026 7228526 7229526 7300026 7301026 7302026 7303026 7304026 7305026 7306026 7307026 7308026 7308526 7309026 7309226	Final Rule- FR 12-8-1995 Medicare Written Policy Medicare Claims Processing Manual Chapter 13 #100.1

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99284	7310026 7311026 7311526 7312026 7313026 7314026 7320026 7320126 7320226 7320626 7321826 7321926 7322026 7322126 7322226 7322326 7322526 7350126 7350226 7350326 7352126 7352226 7352326 7352526 7355126 7355226 7356026 7356226 7356426 7356526 7358026 7359026 7359226 7360026 7361026 7361526 7362026 7363026 7365026 7366026 7370026 7370126 7370226 7370626 7371826 7371926 7372026 7372126 7372226 7372326 7372526 7302226 7415026 7416026 7417026 7417526 7418126 7418226 7418326 7418526 7419026 7421026 7422026 7423026 7423526 7424026 7424126 7424526 7424626 7424726 7424926 7425026 7425126 7426026 7427026 7428026 7428326 7429026 7440026 7441026 7441526 7442026 7442526 7443026 7444026	Final Rule- FR 12-8-1995 Medicare Written Policy Medicare Claims Processing Manual Chapter 13 #100.1
99284	7444526 7445026 7445526 7447026 7471026 7474026 7555726 7555926 7556126 7556326 7560026 7560526 7562526 7601026 7608026 7610026 7612026 7650626 7651126 7651226 7651326 7651626 7651926 7652926 7653626 7664126 7664226 7670026 7677026 7677526 7677626 7680026 7680526 7681026 7681526 7681626 7681826 7681926 7682526 7682726 7682826 7683026 7683126 7685626 7685726 7687026 7687226 7687326 7688126 7688226 7688526 7688626 7697526 7697726 7705326 7705426 7707126 7707226 7707326 7707426 7707526 7707626 7707726 7707826 7708026 7229226 7801526 7801626 7801826 7807026 7807526 7820126 7820226 7820526 7820626 7821526 7821626	Final Rule- FR 12-8-1995 Medicare Written Policy Medicare Claims Processing Manual Chapter 13 #100.1
99284	7823026 7823126 7823226 7825826 7826126 7826226 7826426 7830026 7830526 7830626 7831526 7832026 7835026 7860026 7860126 7860526 7860626 7860726 7860826 7860926 7861026 7863026 7863526 7864526 7864726 7870026 7870126 7870726 7870826 7870926 7871026 7872526 7873026 7874026 7876026 7876126 93014 93018 93042 93224 93227 93272 99354 99355 99356 99357 99401 99402 99403 99404 99411 99412 G0168 S0613 S3005	Final Rule- FR 12-8-1995 Medicare Written Policy Medicare Claims Processing Manual Chapter 13 #100.1

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99285	7110026 7110126 7111026 7111126 7112026 7113026 7125026 7126026 7127026 7127526 7155026 7155126 7155226 7155526 7202026 7204026 7205026 7205226 7207026 7207226 7207426 7208026 7208126 7208226 7208326 7208426 7210026 7211026 7221426 7212026 7212526 7212626 7212726 7212826 7212926 7213026 7213126 7213226 7213326 7214126 7214226 7214626 7214726 7214826 7214926 7215626 7215726 7215826 7215926 7217026 7219026 7219126 7219226 7219326 7219426 7219526 7219626 7219726 7219826 7220026 7220226 7222026 7224026 7225526 7226526 7227026 7228526 7229526 7300026 7301026 7302026 7303026 7304026 7305026 7306026 7307026 7308026 7308526 7309026 7309226	Final Rule- FR 12-8-1995 Medicare Written Policy Medicare Claims Processing Manual Chapter 13 #100.1
99285	7310026 7311026 7311526 7312026 7313026 7314026 7320026 7320126 7320226 7320626 7321826 7321926 7322026 7322126 7322226 7322326 7322526 7350126 7350226 7350326 7352126 7352226 7352326 7352526 7355126 7355226 7356026 7356226 7356426 7356526 7358026 7359026 7359226 7360026 7361026 7361526 7362026 7363026 7365026 7366026 7370026 7370126 7370226 7370626 7371826 7371926 7372026 7372126 7372226 7372326 7372526 7302226 7415026 7416026 7417026 7417526 7418126 7418226 7418326 7418526 7419026 7421026 7422026 7423026 7423526 7424026 7424126 7424526 7424626 7424726 7424926 7425026 7425126 7426026 7427026 7428026 7428326 7429026 7440026 7441026 7441526 7442026 7442526 7443026 7444026	Final Rule- FR 12-8-1995 Medicare Written Policy Medicare Claims Processing Manual Chapter 13 #100.1

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99285	7444526 7445026 7445526 7447026 7471026 7474026 7555726 7555926 7556126 7556326 7560026 7560526 7562526 7601026 7608026 7610026 7650626 7651126 7651226 7651326 7651626 7651926 7652926 7653626 7664126 7664226 7670026 7677026 7677526 7677626 7680026 7680526 7681026 7681526 7681626 7681826 7681926 7682526 7682726 7682826 7683026 7683126 7685626 7685726 7687026 7687226 7687326 7688126 7688226 7688526 7688626 7697526 7697726 7705326 7705426 7707126 7707226 7707326 7707426 7707526 7707626 7707726 7707826 7708026 7229226 7801526 7801626 7801826 7807026 7807526 7820126 7820226 7820526 7820626 7821526 7821626	Final Rule- FR 12-8-1995 Medicare Written Policy Medicare Claims Processing Manual Chapter 13 #100.1
99285	7823026 7823126 7823226 7825826 7826126 7826226 7826426 7830026 7830526 7830626 7831526 7832026 7835026 7860026 7860126 7860526 7860626 7860726 7860826 7860926 7861026 7863026 7863526 7864526 7864726 7870026 7870126 7870726 7870826 7870926 7871026 7872526 7873026 7874026 7876026 7876126 93014 93018 93042 93224 93227 93272 99354 99355 99356 99357 99401 99402 99403 99404 99411 99412 G0168 S0613 S3005	Final Rule- FR 12-8-1995 Medicare Written Policy Medicare Claims Processing Manual Chapter 13 #100.1
99291	36416 82800 82803 82805 82810 82820 99202 99203 99204 99205 99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99224 99225 99226 99231 99232 99233 99234 99235 99236 99238 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99354 99355 99356 99357	Medicare Carriers Manual Medicare Written Policy CPT Text/Definition CPT Assistant Sept 2000 Maintain CCI Logic NCCI Policy Chapter XI T
99292	36415 36416 36591 99354 99355 99356 99357	Medicare Carriers Manual Medicare Written Policy CPT Text/Definition CPT Assistant Sept 2000

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99304	99174 99238 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99304	A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99305	99174 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99401 99402 99403 99404 99411 99412 99463 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99305	A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99306	99174 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99306	A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99307	99174 99231 99251 99401 99402 99403 99404 99411 99412 99463 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99307	A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99308	99174 99231 99232 99251 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99308	A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99309	99174 99231 99232 99233 99238 99251 99252 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99309	A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99310	99174 99231 99232 99233 99238 99251 99252 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99310	A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99315	99174 99224 99225 99226 99231 99232 99238 99251 99401 99402 99403 99404 99411 99412 99463 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99315	A5063 A5071 A5072 A5073 A5081 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99316	99174 99224 99225 99226 99231 99232 99233 99238 99251 99252 99401 99402 99403 99404 99411 99412 99463 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99316	A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99324	99174 99334 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99324	A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 G0168 S0613 S3005	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99325	99174 99334 99335 99336 99337 99347 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99325	A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 G0168 S0613 S3005	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99326	99174 99334 99335 99336 99337 99341 99347 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99326	A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 G0168 S0613 S3005	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99327	99174 99334 99336 99337 99341 99347 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99327	A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 G0168 S0613 S3005	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99328	99174 99334 99341 99347 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4559 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99328	A5081 A5082 A5093 A4649 A5051 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 G0168 S0613 S3005	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99334	99174 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99334	A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99335	99174 99347 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99335	A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99336	99174 99324 99347 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99336	A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99337	99174 99324 99347 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99337	A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99341	99174 99307 99308 99309 99310 99315 99316 99324 99325 99334 99335 99336 99337 99347 99348 99349 99350 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99341	A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 G0168 S0613 S3005 S9098	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99342	99174 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4627 A4628 A4629	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99342	A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 G0168 S0613 S3005 S9098	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99343	99174 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99343	A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 G0168 S0613 S3005 S9098	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99344	99174 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99401 99402 99403 99404 99411 99412 99463 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99344	A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 G0168 0613 S3005 S9098	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99345	99174 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99401 99402 99403 99404 99411 99412 99463 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99345	A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 G0168 S0613 S3005 S9098	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99347	99174 99307 99334 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5062	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99347	A5063 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005 S9098	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99348	99174 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99348	A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005 S9098	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99349	99174 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99342 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99349	A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005 S9098	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99350	99174 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99342 99401 99402 99403 99404 99411 99412 99463 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4336 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623 A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99350	A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005 S9098	Medicare Carriers Manual Section B #15010 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" NCCI Policy Chapter XI T Jurisdiction List
99354	97802 97803 97804	Medicare Written Policy Medicare B News #196

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99355	97802 97803 97804	Medicare Written Policy Medicare B News #196
99356	97802 97803 97804	Medicare Written Policy Medicare B News #196
99357	97802 97803 97804	Medicare Written Policy Medicare B News #196
99381	96112 96116 96127 96150 96151 96152 96153 96154 96155 97802 97803 97804 99202 99203 99204 99205 99211 99212 99213 99214 99215 99224 99225 99226 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623	Integral/Incident To Medicare Written Policy CPT Text/Definition Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99381	A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6252 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Written Policy CPT Text/Definition Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List
99382	96112 96116 96127 96150 96151 96152 96153 96154 96155 97802 97803 97804 99202 99203 99204 99205 99211 99212 99213 99214 99215 99224 99225 99226 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623	Integral/Incident To Medicare Written Policy CPT Text/Definition Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99382	A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6252 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Written Policy CPT Text/Definition Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List
99383	96112 96116 96127 96150 96151 96152 96153 96154 96155 97802 97803 97804 99174 99177 99202 99203 99204 99205 99211 99212 99213 99214 99215 99224 99225 99226 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623	Integral/Incident To Medicare Written Policy CPT Text/Definition Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99383	A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6252 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Written Policy CPT Text/Definition Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List
99384	96112 96116 96127 96150 96151 96152 96153 96154 96155 97802 97803 97804 99202 99203 99204 99205 99211 99212 99213 99214 99215 99224 99225 99226 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623	Integral/Incident To Medicare Written Policy CPT Text/Definition Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99384	A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6252 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Written Policy CPT Text/Definition NCCI Policy Chapt XII D4+5 Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List
99385	96112 96116 96127 96150 96151 96152 96153 96154 96155 97802 97803 97804 99202 99203 99204 99205 99211 99212 99213 99214 99215 99224 99225 99226 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623	Integral/Incident To Medicare Written Policy CPT Text/Definition Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99385	A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6252 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Written Policy CPT Text/Definition NCCI Policy Chapt XII D4+5 Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List
99386	96112 96116 96127 96150 96151 96152 96153 96154 96155 97802 97803 97804 99202 99203 99204 99205 99211 99212 99213 99214 99215 99224 99225 99226 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623	Integral/Incident To Medicare Written Policy CPT Text/Definition Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99386	A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6252 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Written Policy CPT Text/Definition NCCI Policy Chapt XII D4+5 Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List
99387	96112 96116 96127 96150 96151 96152 96153 96154 96155 97802 97803 97804 99202 99203 99204 99205 99211 99212 99213 99214 99215 99224 99225 99226 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623	Integral/Incident To Medicare Written Policy CPT Text/Definition Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99387	A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6252 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Written Policy CPT Text/Definition NCCI Policy Chapt XII D4+5 Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List
99391	96112 96116 96127 96150 96151 96152 96153 96154 96155 97802 97803 97804 99202 99203 99204 99205 99211 99212 99213 99214 99215 99224 99225 99226 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623	Integral/Incident To Medicare Written Policy CPT Text/Definition Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99391	A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6252 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Written Policy CPT Text/Definition NCCI Policy Chapt XII D4+5 Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List
99392	96112 96116 96127 96150 96151 96152 96153 96154 96155 97802 97803 97804 99202 99203 99204 99205 99211 99212 99213 99214 99215 99224 99225 99226 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623	Integral/Incident To Medicare Written Policy CPT Text/Definition Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99392	A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6252 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Written Policy CPT Text/Definition Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List
99393	96112 96116 96127 96150 96151 96152 96153 96154 96155 97802 97803 97804 99202 99203 99204 99205 99211 99212 99213 99214 99215 99224 99225 99226 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623	Integral/Incident To Medicare Written Policy CPT Text/Definition Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99393	A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6252 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Written Policy CPT Text/Definition NCCI Policy Chapt XII D4+5 Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List
99394	96112 96116 96127 96150 96151 96152 96153 96154 96155 97802 97803 97804 99202 99203 99204 99205 99211 99212 99213 99214 99215 99224 99225 99226 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623	Integral/Incident To Medicare Written Policy CPT Text/Definition Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99394	A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6252 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Written Policy CPT Text/Definition NCCI Policy Chapt XII D4+5 Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List
99395	96112 96116 96127 96150 96151 96152 96153 96154 96155 97802 97803 97804 99202 99203 99204 99205 99211 99212 99213 99214 99215 99224 99225 99226 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623	Integral/Incident To Medicare Written Policy CPT Text/Definition Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99395	A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6252 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Written Policy CPT Text/Definition NCCI Policy Chapt XII D4+5 Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List
99396	96112 96116 96127 96150 96151 96152 96153 96154 96155 97802 97803 97804 99202 99203 99204 99205 99211 99212 99213 99214 99215 99224 99225 99226 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623	Integral/Incident To Medicare Written Policy CPT Text/Definition Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99396	A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6252 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Written Policy CPT Text/Definition NCCI Policy Chapt XII D4+5 Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List
99397	96112 96116 96127 96150 96151 96152 96153 96154 96155 97802 97803 97804 99202 99203 99204 99205 99211 99212 99213 99214 99215 99224 99225 99226 99401 99402 99403 99404 99411 99412 A4206 A4207 A4208 A4209 A4211 A4212 A4213 A4215 A4220 A4221 A4222 A4230 A4231 A4232 A4244 A4245 A4246 A4247 A4248 A4250 A4253 A4256 A4258 A4259 A4265 A4301 A4305 A4306 A4310 A4311 A4312 A4313 A4314 A4315 A4316 A4320 A4321 A4322 A4326 A4327 A4328 A4330 A4331 A4332 A4333 A4334 A4335 A4338 A4340 A4344 A4346 A4349 A4351 A4352 A4353 A4354 A4355 A4356 A4357 A4358 A4361 A4362 A4364 A4366 A4367 A4368 A4369 A4371 A4372 A4373 A4375 A4376 A4377 A4378 A4379 A4380 A4381 A4382 A4383 A4384 A4385 A4387 A4388 A4389 A4390 A4391 A4392 A4393 A4394 A4395 A4396 A4398 A4399 A4400 A4402 A4404 A4405 A4406 A4407 A4408 A4409 A4410 A4413 A4414 A4415 A4416 A4417 A4418 A4419 A4420 A4421 A4422 A4450 A4452 A4455 A4465 A4470 A4480 A4481 A4556 A4557 A4558 A4595 A4614 A4615 A4616 A4617 A4618 A4619 A4620 A4623	Integral/Incident To Medicare Written Policy CPT Text/Definition Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99397	A4624 A4625 A4626 A4627 A4628 A4629 A4649 A5051 A5052 A5053 A5054 A5055 A5061 A5062 A5063 A5071 A5072 A5073 A5081 A5082 A5093 A5102 A5105 A5112 A5113 A5114 A5121 A5122 A5126 A5131 A5200 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6252 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6453 A6454 A6455 A6456 A6501 A6502 A6503 A6504 A6505 A6506 A6507 A6508 A6509 A6510 A6511 A6512 S0613 S3005	Medicare Written Policy CPT Text/Definition NCCI Policy Chapt XII D4+5 Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List
99401	96116 97802 97803 97804	Medicare Written Policy CPT Text/Definition Medicare B News #196
99402	96116 97802 97803 97804	Medicare Written Policy CPT Text/Definition Medicare B News #196
99403	96116 97802 97803 97804	Medicare Written Policy CPT Text/Definition Medicare B News #196
99404	96116 97802 97803 97804	Medicare Written Policy CPT Text/Definition Medicare B News #196

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99411	96116 97802 97803 97804	Medicare Written Policy CPT Text/Definition Medicare B News #196
99412	96116 97802 97803 97804	Medicare Written Policy CPT Text/Definition Medicare B News #196
99429	96116 96150 96151 96152 96153 96154 96155 97802 97803 97804	Medicare Written Policy CPT Text/Definition Medicare B News #196
99450	96116 96150 96151 96152 96153 96154 96155 97802 97803 97804	Medicare Written Policy CPT Text/Definition Medicare B News #196
99455	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255	Maintain CCI Logic
99456	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255	Maintain CCI Logic
99460	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255	Medicare Carriers Manual Section B #15010 Maintain CCI Logic NCCI Policy Chapter XI S
99461	99211 99212 99213 99238 99241 99251 99281 99282	Medicare Carriers Manual Section B #15010 Maintain CCI Logic NCCI Policy Chapter XI S

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99462	99238 99281 99282	Medicare Carriers Manual Section B #15010 Maintain CCI Logic NCCI Policy Chapter XI S
99463	99238 99241 99251	Medicare Carriers Manual Section B #15010 Maintain CCI Logic NCCI Policy Chapter XI S
99466	36416 51703 99082 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99366 99367 99368 99441 99442 99443	Medicare Carriers Manual Medicare Written Policy Maintain CCI Logic NCCI Policy Chapter XI T CPT Text/Definition
99467	36416 90846 96116 99082 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99288 G0102	Medicare Carriers Manual Medicare Written Policy Maintain CCI Logic NCCI Policy Chapter XI T CPT Text/Definition
99468	36410 36416 51703 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99366 99367 99368 99441 99442 99443	Medicare Carriers Manual Medicare Written Policy Maintain CCI Logic NCCI Policy Chapter XI T CPT Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99469	36410 36416 51703 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99366 99367 99368 99441 99442 99443	Medicare Carriers Manual Medicare Written Policy Maintain CCI Logic NCCI Policy Chapter XI T CPT Text/Definition
99471	36410 36416 51703 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99366 99367 99368 99441 99442 99443	CCI edits for code 99295 Maintain CCI Logic NCCI Policy Chapter XI T CPT/HCPCS Text/Definition
99472	36410 36416 36591 51703 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99366 99367 99368 99441 99442 99443	CCI code pairs similar code 99296 NCCI Policy Chapter XI T CPT/HCPCS Text/Definition
99475	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255	Maintain CCI Logic
99476	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255	Maintain CCI Logic
99477	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255	Maintain CCI Logic
99478	36410 36416 51703 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99366 99367 99368 99441 99442 99443	Medicare Carriers Manual Medicare Written Policy Maintain CCI Logic NCCI Policy Chapter XI T CPT Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
99479	36410 36416 51703 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99366 99367 99368 99441 99442 99443	Medicare Carriers Manual Medicare Written Policy Maintain CCI Logic NCCI Policy Chapter XI T CPT Text/Definition
99480	36410 36416 51703 95857 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99366 99367 99368 99441 99442 99443	Medicare Carriers Manual Medicare Written Policy Maintain CCI Logic NCCI Policy Chapter XI T CPT Text/Definition
99499	96150 96151 96152 96153 96154 96155 97802 97803 97804	Medicare Written Policy CPT Text/Definition Medicare B News #196
99601	99341 99342 99343 99344 99345 99347 99348 99349	CPT Text/Definition
A4221	A4230 A4231 S1015	DME Region D External Infusion Pumps LCD L33794 Article A52507
A4222	S1015	HCPCS Text/Definition
A4310	A4332	DME - Region D Urological Supplies LCD L33803 Article A52521
A4311	A4310 A4332 A4338	DME - Region D Urological Supplies LCD L33803 Article A52521

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
A4312	A4310 A4332 A4344	DME - Region D Urological Supplies LCD L33803 Article A52521
A4313	A4310 A4332 A4346	DME - Region D Urological Supplies LCD L33803 Article A52521
A4314	A4310 A4311 A4331 A4332 A4338 A4354 A4357	DME - Region D Urological Supplies LCD L33803 Article A52521
A4315	A4310 A4312 A4331 A4332 A4344 A4354 A4357	DME - Region D Urological Supplies LCD L33803 Article A52521
A4316	A4310 A4313 A4331 A4332 A4346 A4354 A4357	DME - Region D Urological Supplies LCD L33803 Article A52521
A4326	A4450 A4452	DME - Region D Urological Supplies LCD L33803 Article A52521
A4349	A4450 A4452	DME - Region D Urological Supplies LCD L33803 Article A52521
A4353	A4310 A4332 A4351 A4352	DME - Region D Urological Supplies LCD L33803 Article A52521

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
A4354	A4310 A4331 A4332 A4357	DME - Region D Urological Supplies LCD L33803 Article A52521
A4357	A4331	DME - Region D Urological Supplies LCD L33803 Article A52521
A4358	A4331 A5113 A5114	DME - Region D Urological Supplies LCD L33803 Article A52521
A4375	A4361 A4377	DME - Region D Ostomy Supplies LCD L33828 Article A52487
A4376	A4361 A4378	DME - Region D Ostomy Supplies LCD L33828 Article A52487
A4379	A4361 A4381 A4382	DME - Region D Ostomy Supplies LCD L33828 Article A52487
A4380	A4361 A4383	DME - Region D Ostomy Supplies LCD L33828 Article A52487
A4416	A4366	DME - Region D Ostomy Supplies LCD L33828 Article A52487

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
A4417	A4366	DME - Region D Supplies Article A52487 Ostomy LCD L33828
A4418	A4366	DME - Region D Supplies Article A52487 Ostomy LCD L33828
A4419	A4366	DME - Region D Supplies Article A52487 Ostomy LCD L33828
A4423	A4366	DME - Region D Supplies Article A52487 Ostomy LCD L33828
A4424	A4366	DME - Region D Supplies Article A52487 Ostomy LCD L33828
A4425	A4366	DME - Region D Supplies Article A52487 Ostomy LCD L33828
A4427	A4366	DME - Region D Supplies Article A52487 Ostomy LCD L33828
A4595	A4556 A4558 A4630	Maintain CCI Logic Text/Definition HCPCS
A4614	S8110	HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
A4625	A4626	DME - Region D Tracheostomy Care Supply LCD L33832 Article A52492
A4629	A4626	DME - Region D Tracheostomy Care Supply LCD L33832 Article A52492
A5105	A4331 A4358 A5112 A5113 A5114	DME - Region D Urological Supplies LCD L33803 Article A52521
A5112	A5113 A5114	DME - Region D Urological Supplies LCD L33803 Article A52521
A5500	97760 97761 97763	CPT/HCPCS Text/Definition
A5501	97760 97761 97763	CPT/HCPCS Text/Definition
A5503	97760 97761 97763	CPT/HCPCS Text/Definition
A5504	97760 97761 97763	CPT/HCPCS Text/Definition
A5505	97760 97761 97763	CPT/HCPCS Text/Definition
A5506	97760 97761 97763	CPT/HCPCS Text/Definition
A5507	97760 97761 97763	CPT/HCPCS Text/Definition
A5508	97760 97761 97763	CPT/HCPCS Text/Definition
A5510	97760 97761 97763	CPT/HCPCS Text/Definition
B4150	S9435	HCPCS Text/Definition
B4152	S9435	HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
B4153	S9435	HCPCS Text/Definition
B4154	S9435	HCPCS Text/Definition
B4155	S9435	HCPCS Text/Definition
D5955	D5954	HCPCS Text/Definition
D5958	D5954 D5955	HCPCS Text/Definition
D5959	D5954 D5955 D5958	HCPCS Text/Definition
E0110	E0111 E0116	HCPCS Text/Definition
E0112	E0113 E0114	HCPCS Text/Definition
E0130	A4636 A4637	DME - Region D Walkers LCD L33791 Article A52503
E0135	A4636 A4637 E0130	DME - Region D Walkers LCD L33791 Article A52503
E0140	A4636 A4637 E0155 E0159	DME - Region D Walkers LCD L33791 Article A52503
E0141	A4636 A4637 E0155 E0159	DME - Region D Walkers LCD L33791 Article A52503
E0143	A4636 A4637 E0155 E0159	DME - Region D Walkers LCD L33791 Article A52503
E0144	A4636 A4637 E0155 E0156 E0159	DME - Region D Walkers LCD L33791 Article A52503
E0147	A4636 E0155 E0159	DME - Region D Walkers LCD L33791 Article A52503

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
E0148	A4636 A4637	DME - Region D Walkers LCD L33791 Article A52503
E0149	A4636 A4637 E0155 E0159	DME - Region D Walkers LCD L33791 Article A52503
E0163	E0167	DME - Region D Commodes LCD L33736 Article A52461
E0165	E0167	DME - Region D Commodes LCD L33736 Article A52461
E0168	E0167	DME - Region D Commodes LCD L33736 Article A52461
E0170	E0167 E0627 E0629	DME - Region D Commodes LCD L33736 Article A52461
E0171	E0167 E0627 E0629	DME - Region D Commodes LCD L33736 Article A52461
E0181	A4640 E0182	DME Region D Pressure Reducing Support LCD L33830 Article A52489
E0250	E0271 E0272 E0305 E0310	DME - Region D Hospital Beds LCD L33820 Article A52508

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
E0251	E0305 E0310	DME - Region D Hospital Beds L33820 Article A52508 LCD
E0255	E0271 E0272 E0305 E0310	DME - Region D Hospital Beds L33820 Article A52508 LCD
E0256	E0305 E0310	DME - Region D Hospital Beds L33820 Article A52508 LCD
E0260	E0271 E0272 E0305 E0310	DME - Region D Hospital Beds L33820 Article A52508 LCD
E0261	E0305 E0310	DME - Region D Hospital Beds L33820 Article A52508 LCD
E0265	E0271 E0272 E0305 E0310	DME - Region D Hospital Beds L33820 Article A52508 LCD
E0266	E0305 E0310	DME - Region D Hospital Beds L33820 Article A52508 LCD
E0290	E0271 E0272	DME - Region D Hospital Beds L33820 Article A52508 LCD

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
E0292	E0271 E0272	DME - Region D Hospital Beds L33820 Article A52508 LCD
E0294	E0271 E0272	DME - Region D Hospital Beds L33820 Article A52508 LCD
E0296	E0271 E0272	DME - Region D Hospital Beds L33820 Article A52508 LCD
E0301	E0305 E0310	DME - Region D Hospital Beds L33820 Article A52508 LCD
E0302	E0305 E0310	DME - Region D Hospital Beds L33820 Article A52508 LCD
E0303	E0271 E0272 E0305 E0310	DME - Region D Hospital Beds L33820 Article A52508 LCD
E0304	E0271 E0272 E0305 E0310	DME - Region D Hospital Beds L33820 Article A52508 LCD
E0328	E0271 E0272 E0305 E0310	DME - Region D Hospital Beds L33820 Article A52508 LCD

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
E0329	E0271 E0272 E0305 E0310	DME - Region D Hospital Beds LCD L33820 Article A52508
E0424	A4606 A4608 A4615 A4616 A4617 A4618 A4619 A4620 A7525 E0439 E0441 E0442 E0443 E0444 E0445 E0455 E0550 E0555 E0560 E0565 E0575 E0580 E0585 E1352 E1353 E1355 E1372 E1390 E1391 E1392 E1405 E1406 S8120 S8121	DME - Region D Oxygen/Oxygen Equipment LCD L33797 Article A52514
E0425	A4606 A4608 A4615 A4616 A4617 A4618 A4619 A4620 A7525 E0424 E0439 E0440 E0441 E0442 E0443 E0444 E0445 E0455 E0550 E0555 E0560 E0565 E0575 E0580 E0585 E1352 E1353 E1355 E1372 E1390 E1391 E1392 E1405 E1406 S8120 S8121	DME - Region D Oxygen/Oxygen Equipment LCD L33797 Article A52514
E0430	A4606 A4608 A4615 A4616 A4617 A4618 A4619 A4620 A7525 E0431 E0433 E0434 E0435 E0441 E0442 E0443 E0444 E0445 E0455 E0550 E0555 E0560 E0565 E0575 E0580 E0585 E1352 E1353 E1355 E1372 E1392 E1405 E1406 S8120 S8121	DME - Region D Oxygen/Oxygen Equipment LCD L33797 Article A52514
E0431	A4606 A4608 A4615 A4616 A4617 A4618 A4619 A4620 A7525 E0434 E0441 E0442 E0444 E0445 E0455 E0550 E0555 E0560 E0565 E0575 E0580 E0585 E1352 E1353 E1355 E1372 E1392 E1405 E1406 S8120 S8121	DME - Region D Oxygen/Oxygen Equipment LCD L33797 Article A52514
E0433	A4606 A4615 A4616 A4617 A4618 A4619 A4620 E0441 E0442 E0443 E0444 E0445 E0550 E0555 E0560 E0565 E0575 E0580 E0585 E1352 E1353 E1355 E1372 E1392 E1405 E1406 S8120 S8121	DME - Region D Oxygen/Oxygen Equipment LCD L33797 Article A52514
E0434	A4606 A4608 A4615 A4616 A4617 A4618 A4619 A4620 A4525 E0441 E0442 E0443 E0444 E0445 A0455 E0550 E0555 E0560 E0565 E0575 E0580 E0585 E1352 E1353 E1355 E1372 E1392 E1405 E1406 S8120 S8121	DME - Region D Oxygen/Oxygen Equipment LCD L33797 Article A52514
E0435	A4606 E4608 A4615 A4616 A4617 A4618 A4619 A4620 A7525 E0431 E0433 E0434 E0441 E0442 E0443 E0444 E0445 E0455 E0550 E0555 E0560 E0565 E0575 E0580 E0585 E1352 E1353 E1355 E1372 E1392 E1405 E1406 S8120 S8121	DME - Region D Oxygen/Oxygen Equipment LCD L33797 Article A52514

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
E0439	A4606 A4608 A4615 A4616 A4617 A4618 A4619 A4620 A7525 E0441 E0442 E0443 E0444 E0445 E0455 E0550 E0555 E0560 E0565 E0575 E0580 E0585 E1352 E1353 E1355 E1372 E1390 E1391 E1392 E1405 E1406 S8120 S8121	DME - Region D Oxygen/Oxygen Equipment LCD L33797 Article A52514
E0440	A4606 A4608 A4615 A4616 A4617 A4618 A4619 A4620 A7525 E0439 E0441 E0442 E0443 E0444 E0445 A0455 E0550 E0555 E0560 E0565 E0575 E0580 E0585 E1352 E1353 E1355 E1372 E1390 E1391 E1392 E1405 E1406 S8120 S8121	DME - Region D Oxygen/Oxygen Equipment LCD L33797 Article A52514
E0465	A4606 E0445	HCPCS Text/Definition Deleted code E0460
E0466	A4606 E0445	HCPCS Text/Definition Deleted code E0461
E0470	A4606 E0445	HCPCS Text/Definition
E0471	A4606 E0445	HCPCS Text/Definition
E0472	A4606 E0445	HCPCS Text/Definition
E0486	21085	NCCI Policy Manual Incidental / Integral To
E0561	A7046	HCPCS Text/Definition
E0562	A7046	HCPCS Text/Definition
E0570	A7014 E0574	DME - Region D Nebulizers LCD L33370 HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
E0575	A4619 A7006 A7010 A7012 A7013 A7014 A7015 E0565	DME - Region D Nebulizers LCD L33370 HCPCS Text/Definition
E0580	E0565 E0575	DME - Region D Nebulizers LCD L33370 HCPCS Text/Definition
E0585	E0565 E0575 E0580 E1372	DME - Region D Nebulizers LCD L33370 HCPCS Text/Definition
E0601	A4606 E0445	HCPCS Text/Definition
E0607	A4233 A4234 A4235 A4236 A4256 A4258	DME - Region D Glucose Monitors LCD L33822 Article A52464 HCPCS Text/Definition
E0625	E0621	DME - Region D Patient Lifts LCD L33799 Article A52516
E0630	E0621	DME - Region D Patient Lifts LCD L33799 Article A52516

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
E0635	E0621	DME - Region D Patient Lifts LCD L33799 Article A52516
E0636	E0621	DME - Region D Patient Lifts LCD L33799 Article A52516
E0639	E0621	DME - Region D Patient Lifts LCD L33799 Article A52516
E0640	E0621	DME - Region D Patient Lifts LCD L33799 Article A52516
E0720	A4556 A4557 A4558 A4630	HCPCS Text/Definition
E0730	A4556 A4557 A4558 A4630	HCPCS Text/Definition
E0935	E0188 E0189	NCCI Policy Integral/Incident To
E0950	E1028	DME - Region D Wheelchair Options LCD L33792 Article A52504
E0954	E1028	DME - Region D Wheelchair Options LCD L33792 Article A52504

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
E0960	E1028	DME - Region D Wheelchair Seating LCD L33312 Article A52505
E0973	K0017 K0018 K0019	DME - Region D Wheelchair Options LCD L33792 Article A52504
E0990	E0995 K0042 K0043 K0044 K0045 K0046 K0047	DME - Region D Wheelchair Options LCD L33792 Article A52504
E1002	E0973 K0015 K0017 K0018 K0019 K0020 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	DME - Region D Wheelchair Options LCD L33792 Article A52504
E1003	E0973 K0015 K0017 K0018 K0019 K0020 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	DME - Region D Wheelchair Options LCD L33792 Article A52504
E1004	E0973 K0015 K0017 K0018 K0019 K0020 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	DME - Region D Wheelchair Options LCD L33792 Article A52504
E1005	E0973 K0015 K0017 K0018 K0019 K0020 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	DME - Region D Wheelchair Options LCD L33792 Article A52504
E1006	E0973 K0015 K0017 K0018 K0019 K0020 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	DME - Region D Wheelchair Options LCD L33792 Article A52504

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
E1007	E0973 K0015 K0017 K0018 K0019 K0020 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	DME - Region D Wheelchair Options LCD L33792 Article A52504
E1008	E0973 K0015 K0017 K0018 K0019 K0020 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	DME - Region D Wheelchair Options LCD L33792 Article A52504
E1009	E0990 E0995 K0042 K0043 K0044 K0045 K0046 K0047 K0052 K0053 K0195	DME - Region D Wheelchair Options LCD L33792 Article A52504
E1010	E0990 E0995 K0042 K0043 K0044 K0045 K0046 K0047 K0052 K0053 K0195	DME - Region D Wheelchair Options LCD L33792 Article A52504
E1012	E0990 E0995 K0042 K0043 K0044 K0045 K0046 K0047 K0052 K0053 K0195	DME - Region D Wheelchair Options LCD L33792 Article A52504
E1020	E1028	DME - Region D Wheelchair Options LCD L33792 Article A52504
E1031	E2291 E2292 E2293 E2294 E2605 E2606 E2608 E2609 E2610 E2611 E2612 E2613 E2614 E2615 E2616 E2617 E2620 E2621 K0669	DME - Region D Wheelchair Seating LCD L33312 Article A52505
E1161	E0967 E0981 E0982 E0995 E2205 E2206 E2210 E2220 E2221 E2222 E2224 E2225 E2226 E2366 E2367 E2378 K0015 K0017 K0018 K0019 K0037 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
E1229	E0967 E0981 E0982 E0995 E2205 E2206 E2210 E2220 E2221 E2222 E2224 E2225 E2226 E2366 E2367 E2378 K0015 K0017 K0018 K0019 K0037 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
E1230	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
E1231	E0967 E0981 E0982 E0995 E2205 E2206 E2210 E2220 E2221 E2222 E2224 E2225 E2226 E2366 E2367 E2378 K0015 K0017 K0018 K0019 K0037 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
E1232	E0967 E0981 E0982 E0995 E2205 E2206 E2210 E2220 E2221 E2222 E2224 E2225 E2226 E2366 E2367 E2378 K0015 K0017 K0018 K0019 K0037 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
E1233	E0967 E0981 E0982 E0995 E2205 E2206 E2210 E2220 E2221 E2222 E2224 E2225 E2226 E2366 E2367 E2378 K0015 K0017 K0018 K0019 K0037 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
E1234	E0967 E0981 E0982 E0995 E2205 E2206 E2210 E2220 E2221 E2222 E2224 E2225 E2226 E2366 E2367 E2378 K0015 K0017 K0018 K0019 K0037 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
E1235	E0967 E0981 E0982 E0995 E2205 E2206 E2210 E2220 E2221 E2222 E2224 E2225 E2226 E2366 E2367 E2378 K0015 K0017 K0018 K0019 K0037 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
E1236	E0967 E0981 E0982 E0995 E2205 E2206 E2210 E2220 E2221 E2222 E2224 E2225 E2226 E2366 E2367 E2378 K0015 K0017 K0018 K0019 K0037 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
E1237	E0967 E0981 E0982 E0995 E2205 E2206 E2210 E2220 E2221 E2222 E2224 E2225 E2226 E2366 E2367 E2378 K0015 K0017 K0018 K0019 K0037 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
E1238	E0967 E0981 E0982 E0995 E2205 E2206 E2210 E2220 E2221 E2222 E2224 E2225 E2226 E2366 E2367 E2378 K0015 K0017 K0018 K0019 K0037 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
E1239	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
E1390	A4608 A4615 A4616 A4617 A4618 A4619 A4620 A7525 E0441 E0442 E0443 E0444 E0445 A0455 E0550 E0555 E0560 E0565 E0575 E0580 E0585 E1352 E1353 E1355 E1372 E1391 E1405 E1406 S8120 S8121	DME - Region D Oxygen/Oxygen Equipment LCD L33797 Article A52514
E1391	A4608 A4615 A4616 A4617 A4618 A4619 A4620 A7525 E0441 E0442 E0443 E0444 E0445 E0455 E0550 E0555 E0560 E0565 E0575 E0580 E0585 E1352 E1353 E1355 E1372 E1405 E1406 S8120 S8121	DME - Region D Oxygen/Oxygen Equipment LCD L33797 Article A52514
E1800	E0188 E0189	Maintain CCI Logic HCPCS Text/Definition
E1801	E0188 E0189	Maintain CCI Logic HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
E1802	E0188 E0189	Maintain CCI Logic Text/Definition HCPCS
E1805	E0188 E0189	Maintain CCI Logic Text/Definition HCPCS
E1806	E0188 E0189	Maintain CCI Logic Text/Definition HCPCS
E1810	E0188 E0189	Maintain CCI Logic Text/Definition HCPCS
E1811	E0188 E0189	Maintain CCI Logic Text/Definition HCPCS
E1815	E0188 E0189	Maintain CCI Logic Text/Definition HCPCS
E1816	E0188 E0189	Maintain CCI Logic Text/Definition HCPCS
E1818	E0188 E0189	Maintain CCI Logic Text/Definition HCPCS
E1820	E0188 E0189	Maintain CCI Logic Text/Definition HCPCS
E1821	E0188 E0189	Maintain CCI Logic Text/Definition HCPCS
E1825	E0188 E0189	Maintain CCI Logic Text/Definition HCPCS
E1830	E0188 E0189	Maintain CCI Logic Text/Definition HCPCS

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
E1840	E0188 E0189	Maintain CCI Logic HCPCS Text/Definition
E2100	A4233 A4234 A4235 A4236 A4256 A4258	DME - Region D Glucose Monitors LCD L33822 Article A52464 HCPCS Text/Definition
E2101	A4233 A4234 A4235 A4236 A4256 A4258	DME - Region D Glucose Monitors LCD L33822 Article A52464 HCPCS Text/Definition
E2325	E1028	DME - Region D Wheelchair Options LCD L33792 Article A52504
E2370	E2368 E2369	DME - Region D Wheelchair Options LCD L33792 Article A52504 HCPCS Text/Definition
E2502	E2500	HCPCS Text/Definition
E2504	E2500 E2502	HCPCS Text/Definition
E2506	E2500 E2502 E2504	HCPCS Text/Definition
E2508	E2500 E2502 E2504 E2506	HCPCS Text/Definition
E2510	E2500 E2502 E2504 E2506 E2508	HCPCS Text/Definition
G0101	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255	Maintain CCI Logic

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
G0104	45391 45392	Maintain CCI Logic CPT/HCPCS Text/Definition
G0105	45391 45392 G0122	Maintain CCI Logic CPT/HCPCS Text/Definition
G0106	45381	Maintain CCI Logic CPT/HCPCS Text/Definition
G0121	G0122	HCPCS Text/Definition
G0122	G0104 G0106 G0120	HCPCS Text/Definition
G0151	97161 97162 97163 97164 97169 97170 97171 97172	Maintain CCI Logic CPT/HCPCS Text/Definition
G0152	97165 97166 97167 97168 97169 97170 97171 97172	Maintain CCI Logic CPT/HCPCS Text/Definition
G0157	97161 97162 97163 97164 97169 97170 97171 97172	Maintain CCI Logic CPT/HCPCS Text/Definition
G0158	97165 97166 97167 97168 97169 97170 97171 97172	Maintain CCI Logic CPT/HCPCS Text/Definition
G0159	97161 97162 97163 97164 97169 97170 97171 97172	Maintain CCI Logic CPT/HCPCS Text/Definition
G0160	97165 97166 97167 97168 97169 97170 97171 97172	Maintain CCI Logic CPT/HCPCS Text/Definition
G0175	S0220 S0221	HCPCS Text/Definition
G0219	78811 78812 78814 78815	Maintain CCI Logic
G0247	11730 11732 11740 11750 11760 11762	CPT/HCPCS Text/Definition
G0255	0106T 0107T 0108T 0109T 0110T	CPT Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
G0260	20600 20605 20610 36000 36410 69990	CPT/HCPCS Text/Definition
G0275	36215 36216 36217 36221 36222 36223 36224 36225 36226	CPT/HCPCS Text/Definition
G0283	99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350 99466 99467 99468 99469 99471 99472 99478 99479 99480 A6010 A6011 A6021 A6022 A6023 A6024 A6154 A6196 A6197 A6198 A6199 A6203 A6204 A6205 A6206 A6207 A6208 A6209 A6210 A6211 A6212 A6213 A6214 A6215 A6216 A6217 A6218 A6219 A6220 A6221 A6222 A6223 A6224 A6228 A6229 A6230 A6231 A6232 A6233 A6234 A6235 A6236 A6237 A6238 A6239 A6240 A6241 A6242 A6243 A6244 A6245 A6246 A6247 A6248 A6250 A6251 A6252 A6253 A6254 A6255 A6256 A6257 A6258 A6259 A6260 A6261 A6262 A6266 A6402 A6403 A6404 A6407 A6410 A6411 A6441 A6442 A6443 A6444 A6445 A6446 A6447 A6448 A6449 A6450 A6451 A6452 A6543 A6454 A6455 A6456	Medicare Written Policy CPT Text/Definition Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List
G0302	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255	Maintain CCI Logic
G0303	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255	Maintain CCI Logic
G0304	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255	Maintain CCI Logic
G0305	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255	Maintain CCI Logic
G0307	85007 85009	Maintain CCI Logic NCCI Policy Chapter X F8

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
G0466	99202 99203 99204 99205 99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350	Medicare Written Policy CPT Text/Definition Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List
G0467	99202 99203 99204 99205 99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99291 99304 99305 99306 99307 99308 99309 99310 99315 99316 99324 99325 99326 99327 99328 99334 99335 99336 99337 99347 99348 99349 99350	Medicare Written Policy CPT Text/Definition Medicare B News #196 Medicare B News #197 Medicare B News #203 CMS Status Indicator "P" Jurisdiction List
K0001	E0967 E0981 E0982 E0995 E2205 E2206 E2210 E2220 E2221 E2222 E2224 E2225 E2226 E2366 E2367 E2378 K0015 K0017 K0018 K0019 K0037 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0002	E0967 E0981 E0982 E0995 E2205 E2206 E2210 E2220 E2221 E2222 E2224 E2225 E2226 E2366 E2367 E2378 K0015 K0017 K0018 K0019 K0037 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0003	E0967 E0981 E0982 E0995 E2205 E2206 E2210 E2220 E2221 E2222 E2224 E2225 E2226 E2366 E2367 E2378 K0015 K0017 K0018 K0019 K0037 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0004	E0967 E0981 E0982 E0995 E2205 E2206 E2210 E2220 E2221 E2222 E2224 E2225 E2226 E2366 E2367 E2378 K0015 K0017 K0018 K0019 K0037 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
K0005	E0967 E0981 E0982 E0995 E2205 E2206 E2210 E2220 E2221 E2222 E2224 E2225 E2226 E2366 E2367 E2378 K0015 K0017 K0018 K0019 K0037 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0006	E0967 E0981 E0982 E0995 E2205 E2206 E2210 E2220 E2221 E2222 E2224 E2225 E2226 E2366 E2367 E2378 K0015 K0017 K0018 K0019 K0037 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0007	E0967 E0981 E0982 E0995 E2205 E2206 E2210 E2220 E2221 E2222 E2224 E2225 E2226 E2366 E2367 E2378 K0015 K0017 K0018 K0019 K0037 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0008	E0967 E0981 E0982 E0995 E2205 E2206 E2210 E2220 E2221 E2222 E2224 E2225 E2226 E2366 E2367 E2378 K0015 K0017 K0018 K0019 K0037 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0009	E0967 E0981 E0982 E0995 E2205 E2206 E2210 E2220 E2221 E2222 E2224 E2225 E2226 E2366 E2367 E2378 K0015 K0017 K0018 K0019 K0037 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0010	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0011	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
K0012	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0013	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0014	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0039	K0038	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0045	K0043 K0044	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0046	K0043	DME - Region D Wheelchair Options LCD L33792 Article A52504

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
K0047	K0044	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0053	E0990 E0995 K0042 K0043 K0044 K0045 K0046 K0047	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0069	E2220 E2224	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0070	E2211 E2212 E2224	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0071	E2214 E2215 E2225 E2226	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0072	E2219 E2225 E2226	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0077	E2221 E2222 E2225 E2226	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0195	E0995 K0042 K0043 K0044 K0045 K0046 K0047	DME - Region D Wheelchair Options LCD L33792 Article A52504

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
K0553	E0607 E2100 E2101 A4233 A4234 A4235 A4236 A4244 A4245 A4246 A4247 A4250 A4253 A4255 A4256 A4257 A4258 A4259	DME - Region D Glucose Monitors LCD L3382 Article A52464
K0800	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0801	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0802	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0806	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
K0807	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366	DME - Region D Wheelchair Options LCD L33792 Article A52504
	E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385	
	E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018	
	K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051	
	K0052 K0069 K0070 K0071 K0072 K0077 K0098	
K0808	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366	DME - Region D Wheelchair Options LCD L33792 Article A52504
	E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385	
	E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018	
	K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051	
	K0052 K0069 K0070 K0071 K0072 K0077 K0098	
K0812	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D Wheelchair Options LCD L33792 Article A52504
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	
K0813	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D Wheelchair Options LCD L33792 Article A52504
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	
K0814	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D Wheelchair Options LCD L33792 Article A52504
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
K0815	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	
K0816	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	
K0820	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	
K0821	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	
K0822	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
K0823	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0824	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0825	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0826	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0827	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
K0828	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	
K0829	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	
K0830	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	
K0831	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	
K0835	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
K0836	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0837	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0838	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0839	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0840	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
K0841	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0842	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0843	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0848	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0849	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
K0850	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0851	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0852	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0853	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0854	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
K0855	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	
K0856	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	
K0857	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	
K0858	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	
K0860	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
K0861	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0862	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0863	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0864	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0868	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
K0869	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	
K0870	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	
K0871	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	
K0877	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	
K0878	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
K0879	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	
K0880	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	
K0884	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	
K0885	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	
K0886	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367	DME - Region D
	E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386	Wheelchair Options LCD
	E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019	L33792 Article A52504
	K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052	
	K0069 K0070 K0071 K0072 K0077 K0098	

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
K0890	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0891	E0967 E0971 E0978 E0981 E0982 E0995 E1225 E2206 E2220 E2221 E2222 E2224 E2366 E2367 E2368 E2369 E2370 E2374 E2375 E2376 E2378 E2381 E2382 E2383 E2384 E2385 E2386 E2387 E2388 E2389 E2390 E2391 E2392 E2394 E2395 E2396 K0015 K0017 K0018 K0019 K0020 K0037 K0040 K0041 K0042 K0043 K0044 K0045 K0046 K0047 K0050 K0051 K0052 K0069 K0070 K0071 K0072 K0077 K0098	DME - Region D Wheelchair Options LCD L33792 Article A52504
K0901	97760 97761 97763	CPT/HCPCS Text/Definition
K0902	97760 97761 97763	CPT/HCPCS Text/Definition
L0113	97760 97761 97763	CPT/HCPCS Text/Definition
L0130	97760 97761 97763	CPT/HCPCS Text/Definition
L0170	97760 97761 97763	CPT/HCPCS Text/Definition
L0220	97760 97761 97763	CPT/HCPCS Text/Definition
L0450	97760 97761 97763	CPT/HCPCS Text/Definition
L0452	97760 97761 97763	CPT/HCPCS Text/Definition
L0454	97760 97761 97763	CPT/HCPCS Text/Definition
L0455	97760 97761 97763	CPT/HCPCS Text/Definition
L0456	97760 97761 97763	CPT/HCPCS Text/Definition
L0457	97760 97761 97763	CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
L0458	97760 97761 97763	CPT/HCPCS Text/Definition
L0460	97760 97761 97763	CPT/HCPCS Text/Definition
L0462	97760 97761 97763	CPT/HCPCS Text/Definition
L0464	97760 97761 97763	CPT/HCPCS Text/Definition
L0466	97760 97761 97763	CPT/HCPCS Text/Definition
L0467	97760 97761 97763	CPT/HCPCS Text/Definition
L0468	97760 97761 97763	CPT/HCPCS Text/Definition
L0469	97760 97761 97763	CPT/HCPCS Text/Definition
L0470	97760 97761 97763	CPT/HCPCS Text/Definition
L0472	97760 97761 97763	CPT/HCPCS Text/Definition
L0480	97760 97761 97763	CPT/HCPCS Text/Definition
L0482	97760 97761 97763	CPT/HCPCS Text/Definition
L0484	97760 97761 97763	CPT/HCPCS Text/Definition
L0486	97760 97761 97763	CPT/HCPCS Text/Definition
L0488	97760 97761 97763	CPT/HCPCS Text/Definition
L0490	97760 97761 97763	CPT/HCPCS Text/Definition
L0641	97760 97761 97763	CPT/HCPCS Text/Definition
L0642	97760 97761 97763	CPT/HCPCS Text/Definition
L0643	97760 97761 97763	CPT/HCPCS Text/Definition
L0648	97760 97761 97763	CPT/HCPCS Text/Definition
L0649	97760 97761 97763	CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
L0650	97760 97761 97763	CPT/HCPCS Text/Definition
L0651	97760 97761 97763	CPT/HCPCS Text/Definition
L0700	97760 97761 97763	CPT/HCPCS Text/Definition
L0710	97760 97761 97763	CPT/HCPCS Text/Definition
L1000	97760 97761 97763	CPT/HCPCS Text/Definition
L1005	97760 97761 97763	CPT/HCPCS Text/Definition
L1110	97760 97761 97763	CPT/HCPCS Text/Definition
L1300	97760 97761 97763	CPT/HCPCS Text/Definition
L1600	97760 97761 97763	CPT/HCPCS Text/Definition
L1610	97760 97761 97763	CPT/HCPCS Text/Definition
L1620	97760 97761 97763	CPT/HCPCS Text/Definition
L1630	97760 97761 97763	CPT/HCPCS Text/Definition
L1640	97760 97761 97763	CPT/HCPCS Text/Definition
L1650	97760 97761 97763	CPT/HCPCS Text/Definition
L1652	97760 97761 97763	CPT/HCPCS Text/Definition
L1660	97760 97761 97763	CPT/HCPCS Text/Definition
L1680	97760 97761 97763	CPT/HCPCS Text/Definition
L1685	97760 97761 97763	CPT/HCPCS Text/Definition
L1686	97760 97761 97763	CPT/HCPCS Text/Definition
L1690	97760 97761 97763	CPT/HCPCS Text/Definition
L1700	97760 97761 97763	CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
L1710	97760 97761 97763	CPT/HCPCS Text/Definition
L1720	97760 97761 97763	CPT/HCPCS Text/Definition
L1730	97760 97761 97763	CPT/HCPCS Text/Definition
L1755	97760 97761 97763	CPT/HCPCS Text/Definition
L1810	97760 97761 97763 A9270 L2390 L2397 L2750 L2780 L4002	DME - Region D Knee Orthoses LCD L33318 Article A62465 CPT/HCPCS Text/Definition
L1812	97760 97761 97763 L2390 L2397 L2750 L2780 L4002	CPT/HCPCS Text/Definition
L1820	97760 97761 97763 A9270 L2390 L2397 L2750 L2780 L2810 L4002	DME - Region D Knee Orthoses LCD L33318 Article A62465 CPT/HCPCS Text/Definition
L1830	97760 97761 97763 A9270 K0672 L2397 L4002	DME - Region D Knee Orthoses LCD L33318 Article A62465 CPT/HCPCS Text/Definition
L1831	97760 97761 97763 A2970 K0672 L2390 L2397 L2425 L2430 L2750 L2780 L2795 L2810 L2820 L2830 L4002	DME - Region D Knee Orthoses LCD L33318 Article A62465 CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
L1832	97760 97761 97763 A2970 K0672 L2390 L2405 L2415 L2425 L2430 L2492 L2750 L2780 L2785 L2820 L2830 L4002	DME - Region D Knee Orthoses LCD L33318 Article A62465 CPT/HCPCS Text/Definition
L1833	97760 97761 97763 K0672 L2390 L2405 L2415 L2425 L2430 L2492 L2750 L2780 L2785 L2820 L2830 L4002	CPT/HCPCS Text/Definition
L1834	97760 97761 97763 A9270 K0672 L2397 L2800 L2820 L2830 L4002	DME - Region D Knee Orthoses LCD L33318 Article A62465 CPT/HCPCS Text/Definition
L1836	97760 97761 97763 A9270 K0672 L2397 L2750 L2780 L2810 L2820 L2830 L4002	DME - Region D Knee Orthoses LCD L33318 Article A62465 CPT/HCPCS Text/Definition
L1840	97760 97761 97763 A9270 K0672 L2275 L2320 L2330 L2750 L2780 L2800 L2810 L2820 L2830 L4002	DME - Region D Knee Orthoses LCD L33318 Article A62465 CPT/HCPCS Text/Definition
L1843	97760 97761 97763 A9270 K0672 L2275 L2390 L2405 L2425 L2430 L2492 L2750 L2780 L2785 L2810 L2820 L2830 L4002	DME - Region D Knee Orthoses LCD L33318 Article A62465 CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
L1844	97760 97761 97763 A9270 K0672 L2275 L2320 L2330 L2425 L2430 L2750 L2780 L2810 L2820 L2830 L4002	DME - Region D Knee Orthoses LCD L33318 Article A62465 CPT/HCPCS Text/Definition
L1845	97760 97761 97763 A9270 K0672 L2275 L2390 L2405 L2415 L2425 L2430 L2492 L2750 L2780 L2785 L2810 L2820 L2830 L4002	DME - Region D Knee Orthoses LCD L33318 Article A62465 CPT/HCPCS Text/Definition
L1846	97760 97761 97763 A9270 K0672 L2275 L2320 L2330 L2425 L2430 L2750 L2780 L2810 L2820 L2830 L4002	DME - Region D Knee Orthoses LCD L33318 Article A62465 CPT/HCPCS Text/Definition
L1847	97760 97761 97763 A9270 K0672 L2390 L2397 L2425 L2430 L2750 L2780 L2795 L2810 L2820 L2830 L4002	DME - Region D Knee Orthoses LCD L33318 Article A62465 CPT/HCPCS Text/Definition
L1848	97760 97761 97763 K0672 L2390 L2397 L2425 L2430 L2750 L2780 L2795 L2810 L2820 L2830 L4002	CPT/HCPCS Text/Definition
L1850	97760 97761 97763 A9270 K0672 L2275 L2750 L2780 L2820 L2830	DME - Region D Knee Orthoses LCD L33318 Article A62465 CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
L1860	97760 97761 97763 A9270 K0672 L2820 L2830	DME - Region D Knee Orthoses LCD L33318 Article A62465 CPT/HCPCS Text/Definition
L1848	97760 97761 97763	CPT/HCPCS Text/Definition
L1850	L2810 L4002	DME - Region D Knee Orthoses LCD L33318 Article A62465 CPT/HCPCS Text/Definition
L1851	K0672 L2275 L2390 L2405 L2425 L2430 L2492 L2750 L2780 L2785 L2810 L2820 L2830 L4002	DME - Region D Knee Orthoses LCD L33318 Article A62465 CPT/HCPCS Text/Definition
L1852	K0672 L2275 L2390 L2405 L2415 L2425 L2430 L2492 L2750 L2780 L2785 L2810 L2820 L2830 L4002	DME - Region D Knee Orthoses LCD L33318 Article A62465 CPT/HCPCS Text/Definition
L1860	L2397 L4002	DME - Region D Knee Orthoses LCD L33318 Article A62465 CPT/HCPCS Text/Definition
L1900	97760 97761 97763 L4002 L4090 L4110	DME - Region D A /F & K/ A /F Orthosis LCD L33686 Article A52457 CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
L1902	97760 97761 97763	CPT/HCPCS Text/Definition
L1904	97760 97761 97763	CPT/HCPCS Text/Definition
L1906	97760 97761 97763	CPT/HCPCS Text/Definition
L1907	97760 97761 97763	CPT/HCPCS Text/Definition
L1910	97760 97761 97763 L4002 L4090 L4110	DME - Region D A /F & K/ A /F Orthosis LCD L33686 Article A52457 CPT/HCPCS Text/Definition
L1920	97760 97761 97763 L4002 L4090 L4110	DME - Region D A /F & K/ A /F Orthosis LCD L33686 Article A52457 CPT/HCPCS Text/Definition
L1930	97760 97761 97763	CPT/HCPCS Text/Definition
L1932	97760 97761 97763	CPT/HCPCS Text/Definition
L1940	97760 97761 97763 L4002	DME - Region D A /F & K/ A /F Orthosis LCD L33686 Article A52457 CPT/HCPCS Text/Definition
L1945	97760 97761 97763	CPT/HCPCS Text/Definition
L1950	97760 97761 97763	CPT/HCPCS Text/Definition
L1951	97760 97761 97763	CPT/HCPCS Text/Definition
L1960	97760 97761 97763	CPT/HCPCS Text/Definition
L1970	97760 97761 97763	CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
L1971	97760 97761 97763	CPT/HCPCS Text/Definition
L1980	97760 97761 97763 L4002 L4090 L4110	DME - Region D A /F & K/ A /F Orthosis LCD L33686 Article A52457 CPT/HCPCS Text/Definition
L1990	97760 97761 97763 L4002 L4090 L4110	DME - Region D A /F & K/ A /F Orthosis LCD L33686 Article A52457 CPT/HCPCS Text/Definition
L2000	97760 97761 97763 L4002 L4070 L4080 L4090 L4100 L4110	DME - Region D A /F & K/ A /F Orthosis LCD L33686 Article A52457 CPT/HCPCS Text/Definition
L2005	97760 97761 97763 L4002 L4070 L4080 L4090 L4100 L4110	DME - Region D A /F & K/ A /F Orthosis LCD L33686 Article A52457 CPT/HCPCS Text/Definition
L2010	97760 97761 97763 L4002 L4070 L4080 L4090 L4100 L4110	DME - Region D A /F & K/ A /F Orthosis LCD L33686 Article A52457 CPT/HCPCS Text/Definition
L2020	97760 97761 97763 L4002 L4070 L4080 L4090 L4100 L4110	DME - Region D A /F & K/ A /F Orthosis LCD L33686 Article A52457 CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
L2030	97760 97761 97763 L4002 L4070 L4080 L4090 L4100 L4110	DME - Region D A /F & K/ A /F Orthosis LCD L33686 Article A52457 CPT/HCPCS Text/Definition
L2034	97760 97761 97763	CPT/HCPCS Text/Definition
L2035	97760 97761 97763	CPT/HCPCS Text/Definition
L2036	97760 97761 97763 L4002 L4070	DME - Region D A /F & K/ A /F Orthosis LCD L33686 Article A52457 CPT/HCPCS Text/Definition
L2037	97760 97761 97763 L4002 L4070	DME - Region D A /F & K/ A /F Orthosis LCD L33686 Article A52457 CPT/HCPCS Text/Definition
L2038	97760 97761 97763	CPT/HCPCS Text/Definition
L2040	97760 97761 97763	CPT/HCPCS Text/Definition
L2050	97760 97761 97763	CPT/HCPCS Text/Definition
L2060	97760 97761 97763	CPT/HCPCS Text/Definition
L2070	97760 97761 97763	CPT/HCPCS Text/Definition
L2080	97760 97761 97763	CPT/HCPCS Text/Definition
L2090	97760 97761 97763	CPT/HCPCS Text/Definition
L2106	97760 97761 97763	CPT/HCPCS Text/Definition
L2108	97760 97761 97763	CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
L2112	97760 97761 97763	CPT/HCPCS Text/Definition
L2114	97760 97761 97763	CPT/HCPCS Text/Definition
L2116	97760 97761 97763	CPT/HCPCS Text/Definition
L2126	97760 97761 97763	CPT/HCPCS Text/Definition
L2128	97760 97761 97763	CPT/HCPCS Text/Definition
L2132	97760 97761 97763	CPT/HCPCS Text/Definition
L2134	97760 97761 97763	CPT/HCPCS Text/Definition
L2136	97760 97761 97763	CPT/HCPCS Text/Definition
L2188	97760 97761 97763 L4002 L4020 L4030	DME - Region D A /F & K/ A /F Orthosis LCD L33686 Article A52457 CPT/HCPCS Text/Definition
L2232	97760 97761 97763	CPT/HCPCS Text/Definition
L2250	97760 97761 97763	CPT/HCPCS Text/Definition
L2320	97760 97761 97763 L4045 L4055	DME - Region D A /F & K/ A /F Orthosis LCD L33686 Article A52457 CPT/HCPCS Text/Definition
L2330	97760 97761 97763 L4045 L4055	DME - Region D A /F & K/ A /F Orthosis LCD L33686 Article A52457 CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
L2335	97760 97761 97763 L4090	DME - Region D A /F & K/ A /F Orthosis LCD L33686 Article A52457 CPT/HCPCS Text/Definition
L2340	97760 97761 97763 L4130	DME - Region D A /F & K/ A /F Orthosis LCD L33686 Article A52457 CPT/HCPCS Text/Definition
L2350	97760 97761 97763	CPT/HCPCS Text/Definition
L2510	97760 97761 97763 L4020	DME - Region D A /F & K/ A /F Orthosis LCD L33686 Article A52457 CPT/HCPCS Text/Definition
L2520	97760 97761 97763 L4030	DME - Region D A /F & K/ A /F Orthosis LCD L33686 Article A52457 CPT/HCPCS Text/Definition
L2525	97760 97761 97763	CPT/HCPCS Text/Definition
L2526	97760 97761 97763	CPT/HCPCS Text/Definition
L2530	97760 97761 97763 L4045	DME - Region D A /F & K/ A /F Orthosis LCD L33686 Article A52457 CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
L2540	97760 97761 97763 L4040	DME - Region D A /F & K/ A /F Orthosis LCD L33686 Article A52457 CPT/HCPCS Text/Definition
L2550	97760 97761 97763 L4060	DME - Region D A /F & K/ A /F Orthosis LCD L33686 Article A52457 CPT/HCPCS Text/Definition
L2627	97760 97761 97763	CPT/HCPCS Text/Definition
L3000	97760 97761 97763	CPT/HCPCS Text/Definition
L3001	97760 97761 97763	CPT/HCPCS Text/Definition
L3002	97760 97761 97763	CPT/HCPCS Text/Definition
L3003	97760 97761 97763	CPT/HCPCS Text/Definition
L3010	97760 97761 97763	CPT/HCPCS Text/Definition
L3020	97760 97761 97763	CPT/HCPCS Text/Definition
L3030	97760 97761 97763	CPT/HCPCS Text/Definition
L3031	97760 97761 97763	CPT/HCPCS Text/Definition
L3040	97760 97761 97763	CPT/HCPCS Text/Definition
L3050	97760 97761 97763	CPT/HCPCS Text/Definition
L3060	97760 97761 97763	CPT/HCPCS Text/Definition
L3250	97760 97761 97763	CPT/HCPCS Text/Definition
L3251	97760 97761 97763	CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
L3252	97760 97761 97763	CPT/HCPCS Text/Definition
L3253	97760 97761 97763	CPT/HCPCS Text/Definition
L3650	97760 97761 97763	CPT/HCPCS Text/Definition
L3660	97760 97761 97763	CPT/HCPCS Text/Definition
L3670	97760 97761 97763	CPT/HCPCS Text/Definition
L3675	97760 97761 97763	CPT/HCPCS Text/Definition
L3677	97760 97761 97763	CPT/HCPCS Text/Definition
L3678	97760 97761 97763	CPT/HCPCS Text/Definition
L3710	97760 97761 97763	CPT/HCPCS Text/Definition
L3720	97760 97761 97763	CPT/HCPCS Text/Definition
L3730	97760 97761 97763	CPT/HCPCS Text/Definition
L3740	97760 97761 97763	CPT/HCPCS Text/Definition
L3760	97760 97761 97763	CPT/HCPCS Text/Definition
L3762	97760 97761 97763	CPT/HCPCS Text/Definition
L3807	97760 97761 97763	CPT/HCPCS Text/Definition
L3809	97760 97761 97763	CPT/HCPCS Text/Definition
L3900	97760 97761 97763	CPT/HCPCS Text/Definition
L3901	97760 97761 97763	CPT/HCPCS Text/Definition
L3904	97760 97761 97763	CPT/HCPCS Text/Definition
L3906	97760 97761 97763	CPT/HCPCS Text/Definition
L3908	97760 97761 97763	CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
L3912	97760 97761 97763	CPT/HCPCS Text/Definition
L3916	97760 97761 97763	CPT/HCPCS Text/Definition
L3917	97760 97761 97763	CPT/HCPCS Text/Definition
L3918	97760 97761 97763	CPT/HCPCS Text/Definition
L3923	97760 97761 97763	CPT/HCPCS Text/Definition
L3924	97760 97761 97763	CPT/HCPCS Text/Definition
L3930	97760 97761 97763	CPT/HCPCS Text/Definition
L3960	97760 97761 97763	CPT/HCPCS Text/Definition
L3962	97760 97761 97763	CPT/HCPCS Text/Definition
L3980	97760 97761 97763	CPT/HCPCS Text/Definition
L3982	97760 97761 97763	CPT/HCPCS Text/Definition
L3984	97760 97761 97763	CPT/HCPCS Text/Definition
L4020	97760 97761 97763	CPT/HCPCS Text/Definition
L4030	97760 97761 97763	CPT/HCPCS Text/Definition
L4040	97760 97761 97763	CPT/HCPCS Text/Definition
L4050	97760 97761 97763	CPT/HCPCS Text/Definition
L4350	97760 97761 97763	CPT/HCPCS Text/Definition
L4360	97760 97761 97763	CPT/HCPCS Text/Definition
L4361	97760 97761 97763	CPT/HCPCS Text/Definition
L4370	97760 97761 97763	CPT/HCPCS Text/Definition
L4386	97760 97761 97763	CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
L4387	97760 97761 97763	CPT/HCPCS Text/Definition
L4396	97760 97761 97763	CPT/HCPCS Text/Definition
L4397	97760 97761 97763	CPT/HCPCS Text/Definition
L4398	97760 97761 97763	CPT/HCPCS Text/Definition
L5500	L5629 L5638 L5639 L5646 L5647 L5704 L5785 L5962 L5980	DME - Region D Limb Prosthesis Article A52496 Lower LCD L33787
L5510	L5629 L5638 L5639 L5646 L5647 L5704 L5785 L5962 L5980	DME - Region D Limb Prosthesis Article A52496 Lower LCD L33787
L5520	L5629 L5638 L5639 L5646 L5647 L5704 L5785 L5962 L5980	DME - Region D Limb Prosthesis Article A52496 Lower LCD L33787
L5530	L5629 L5638 L5639 L5646 L5647 L5704 L5785 L5962 L5980	DME - Region D Limb Prosthesis Article A52496 Lower LCD L33787
L5540	L5629 L5638 L5639 L5646 L5647 L5704 L5785 L5962 L5980	DME - Region D Limb Prosthesis Article A52496 Lower LCD L33787
L5590	L5631 L5980	DME - Region D Limb Prosthesis Article A52496 Lower LCD L33787

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
L5781	L7360 L7362 L7364 L7366 L7367 L7368 L8505	DME - Region D Limb Prosthesis Article A52496 Lower LCD L33787
L5782	L7360 L7362 L7364 L7366 L7367 L7368 L8505	DME - Region D Limb Prosthesis Article A52496 Lower LCD L33787
L5856	L7360 L7362 L7364 L7366 L7367 L7368 L8505	DME - Region D Limb Prosthesis Article A52496 Lower LCD L33787
L5857	L7360 L7362 L7364 L7366 L7367 L7368 L8505	DME - Region D Limb Prosthesis Article A52496 Lower LCD L33787
L5858	L7360 L7362 L7364 L7366 L7367 L7368 L8505	DME - Region D Limb Prosthesis Article A52496 Lower LCD L33787
L5859	L7360 L7362 L7364 L7366 L7367 L7368 L8505	DME - Region D Limb Prosthesis Article A52496 Lower LCD L33787
L5973	L7360 L7362 L7364 L7366 L7367 L7368 L8505	DME - Region D Limb Prosthesis Article A52496 Lower LCD L33787
L6692	97760 97761 97763	CPT/HCPCS Text/Definition
L6694	97760 97761 97763	CPT/HCPCS Text/Definition
L6695	97760 97761 97763	CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
L6696	97760 97761 97763	CPT/HCPCS Text/Definition
L6697	97760 97761 97763	CPT/HCPCS Text/Definition
P3000	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255	Maintain CCI Logic
P3001	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255	Maintain CCI Logic
P9053	P9010 P9011 P9016 P9019 P9020 P9021 P9022 P9031 P9034 P9035 P9039	Maintain CCI Logic
P9055	P9010 P9011 P9016 P9019 P9020 P9021 P9022 P9031 P9034 P9035 P9039	Maintain CCI Logic
Q0091	99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 G0101	Maintain CCI Logic
S0199	76801 76805 76811 76813 76815 76816 76817 81025 84702 84703 99202 99203 99204 99205 99211 99212 99213 99214 99215 99217 99218 99219 99220 99221 99222 99223 99231 99232 99233 99234 99235 99236 99238 99239 99241 99242 99243 99244 99245 99251 99252 99253 99254 99255 99281 99282 99283 99284 99285 99291 99354 99356 99384 99385 99386 99394 99395 99396	CPT/HCPCS Text/Definition
S0220	S0221	HCPCS Text/Definition
S0618	V5008 V5010 V5011	HCPCS Text/Definition
S0610	G0101 Q0091	Maintain CCI Logic NCCI Policy Chapter XI G CPT/HCPCS Text/Definition
S0612	G0101 Q0091	Maintain CCI Logic NCCI Policy Chapter XI G CPT/HCPCS Text/Definition
S0620	99202 99203 99204 99205 99211 99212 99213 99214 99215 99241 99242 99243 99244 99245 G0117 G0118 S3000	Maintain CCI Logic NCCI Policy Chapter XI G CPT/HCPCS Text/Definition

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
S0621	99202 99203 99204 99205 99211 99212 99213 99214 99215 99241 99242 99243 99244 99245 G0117 G0118 S0620 S3000	Maintain CCI Logic NCCI Policy Chapter XI G CPT/HCPCS Text/Definition
S2066	14301 15734 15877 15878 15789 20926 35761	NCCI Policy Integral/Incident To
S2067	14301 15734 15877 15878 15789 20926 35761	NCCI Policy Integral/Incident To
S2068	14301 15734 15877 15878 15789 20926 35761	NCCI Policy Integral/Incident To
S2095	69990	CPT/HCPCS Text/Definition
S2117	01470 10060 10140 10160 11000 11001 11010 11011 11012 11042 11043 11044 20103 20550 20551 20552 20553 28050 28190 28192 28193 29130 29131 29540 69990	Maintain CCI Logic NCCI Policy Chapter III C CPT TextDefinition
S2202	36405 36406 36420 36425 36430 36440 36600 36640 43752 64505 64510 64517 64520 64530 69990 76998 93000 93005 93010 93040 93041 93042 93318 93970 93971 94002 94680 94681 94690 95812 95813 95816 95819 95822 95829 95955 96360 96365 96372 96374 96375 96376	Maintain CCI Logic
S2206	S2205	HCPCS Text/Definition
S2207	S2205 S2206	HCPCS Text/Definition
S2208	S2205 S2206 S2207	HCPCS Text/Definition
S2209	S2205 S2206 S2207 S2208	HCPCS Text/Definition
S2225	69210 69420 69421 69424 69540 69990 G0268	Maintain CCI Logic CPT/HCPCS Text/Defintion

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
S2340	95822 95860 95861 95863 95864 95867 95868 95869 95907 95908 95909 95910 95911 95912 95913 95920 95925 95926 95927 95928 95929 95930 95933 95937	Same CCI code pairs as code 64614
S2341	95822 95860 95861 95863 95864 95867 95868 95869 95907 95908 95909 95910 95911 95912 95913 95920 95925 95926 95927 95928 95929 95930 95933 95937	Same CCI code pairs as code 64614
S3620	83020 83498 84030 84436	CPT/HCPCS Text/Definition
S9061	99601	Maintain CCI Logic CPT/HCPCS Text/Defintion
S9122	S9125 S9126	HCPCS Text/Definition
S9125	S9126	HCPCS Text/Definition
S9140	S9141 S9455 S9460 S9465 S9470	HCPCS Text/Definition
S9141	S9455 S9460 S9465 S9470	HCPCS Text/Definition
S9325	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9326	S5497 S5498 S5501 S5502 S9325 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9327	S5497 S5498 S5501 S5502 S9325 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9328	S5497 S5498 S5501 S5502 S9325 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
S9329	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9330	S5497 S5498 S5501 S5502 S9329 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9331	S5497 S5498 S5501 S5502 S9329 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9336	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9338	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9345	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9346	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9347	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
S9348	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9349	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9351	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9353	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9355	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9357	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9359	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9361	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
S9363	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9364	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9365	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9366	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9367	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9368	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9373	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9374	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
S9375	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9376	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9377	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9379	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9490	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9494	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9497	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9500	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA

Supplement to CCI version 28.3

CPT® is a trademark of the American Medical Association

The appearance of HCPCS/CPT codes does not necessarily indicate coverage.

Correct Code Editor

Supplement to CCI Version 28.3

Effective for dates of service beginning 10/1/2022

These edits are not listed separately in the grid.

The following codes will be denied when billed on the same date of service as a surgical code (including anesthesia codes).

11981 36000 36400 36410 51701 51702 51703 62324 62325 62326 62327 64400 64405 64408 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446 64447 64448
 64449 64450 64455 64479 64483 64486 64487 64488 64489 92585 95822 95860 95861 95863 95864 95865 95866 95867 95868 95869 95870 95907 95908 95909 95910 95911
 95912 95913 95925 95926 95927 95928 95929 95930 95933 95937 95938 95939 95940 95941 A4206 A4207 A4208 A4209 A4213 A4215 A4450 A4452 A4649 J0670 G0453
 J2001 J2400 J2795

Code 69990 will be denied when billed with codes NOT documented in the CMS Claims Processing Manual Chapter 12 # 20.4.5 list of eligible codes.

Our health plan will deny an add-on code as a CCE denial when its primary code is denied as part of a CCI or CCE code pair.

We will not reimburse anesthesia codes 00100-01999 submitted by the same provider submitting a surgical code. Modifiers will not bypass these denials.

Primary Code	Component Code	Rationale
S9501	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9502	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9503	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9504	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA
S9538	S5497 S5498 S5501 S5502 S9810	NHIA National Coding Standard for Home Infusion Claims under HIPAA