

**Cigna Commercial**  
**Prior Authorization Procedure Code List: Other Services**

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Other Services	Potentially Cosmetic	11950	Subcutaneous injection of filling material (eg, collagen); 1 cc or less	Yes	CareCore National	
Other Services	Potentially Cosmetic	11951	Subcutaneous injection of filling material (eg, collagen); 1.1 to 5.0 cc	Yes	CareCore National	
Other Services	Potentially Cosmetic	11952	Subcutaneous injection of filling material (eg, collagen); 5.1 to 10.0 cc	Yes	CareCore National	
Other Services	Potentially Cosmetic	11954	Subcutaneous injection of filling material (eg, collagen); over 10.0 cc	Yes	CareCore National	
Other Services	Experimental / Investigational	15011	Harvest of skin for skin cell suspension autograft; first 25 sq cm or less	Yes	CareCore National	
Other Services	Experimental / Investigational	15012	Harvest of skin for skin cell suspension autograft; each additional 25 sq cm or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	15013	Preparation of skin cell suspension autograft, requiring enzymatic processing, manual mechanical disaggregation of skin cells, and filtration; first 25 sq cm or less of harvested skin	Yes	CareCore National	
Other Services	Experimental / Investigational	15014	Preparation of skin cell suspension autograft, requiring enzymatic processing, manual mechanical disaggregation of skin cells, and filtration; each additional 25 sq cm of harvested skin or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	15015	Application of skin cell suspension autograft to wound and donor sites, including application of primary dressing, trunk, arms, legs; first 480 sq cm or less	Yes	CareCore National	
Other Services	Experimental / Investigational	15016	Application of skin cell suspension autograft to wound and donor sites, including application of primary dressing, trunk, arms, legs; each additional 480 sq cm or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	15017	Application of skin cell suspension autograft to wound and donor sites, including application of primary dressing, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; first 480 sq cm or less	Yes	CareCore National	
Other Services	Experimental / Investigational	15018	Application of skin cell suspension autograft to wound and donor sites, including application of primary dressing, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; each additional 480 sq cm or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	15150	Tissue cultured skin autograft, trunk, arms, legs; first 25 sq cm or less	Yes	CareCore National	
Other Services	Outpatient Surgery	15151	Tissue cultured skin autograft, trunk, arms, legs; additional 1 sq cm to 75 sq cm (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	15152	Tissue cultured skin autograft, trunk, arms, legs; each additional 100 sq cm, or each additional 1% of body area of infants and children, or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	15155	Tissue cultured skin autograft, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; first 25 sq cm or less	Yes	CareCore National	
Other Services	Outpatient Surgery	15156	Tissue cultured skin autograft, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; additional 1 sq cm to 75 sq cm (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	15157	Tissue cultured skin autograft, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; each additional 100 sq cm, or each additional 1% of body area of infants and children, or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	15271	Application of skin substitute graft to trunk, arms, legs, total wound surface area up to 100 sq cm; first 25 sq cm or less wound surface area	Yes	CareCore National	
Other Services	Experimental / Investigational	15272	Application of skin substitute graft to trunk, arms, legs, total wound surface area up to 100 sq cm; each additional 25 sq cm wound surface area, or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	15273	Application of skin substitute graft to trunk, arms, legs, total wound surface area greater than or equal to 100 sq cm; first 100 sq cm wound surface area, or 1% of body area of infants and children	Yes	CareCore National	
Other Services	Experimental / Investigational	15274	Application of skin substitute graft to trunk, arms, legs, total wound surface area greater than or equal to 100 sq cm; each additional 100 sq cm wound surface area, or part thereof, or each additional 1% of body area of infants and children, or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	15275	Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area up to 100 sq cm; first 25 sq cm or less wound surface area	Yes	CareCore National	
Other Services	Experimental / Investigational	15276	Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area up to 100 sq cm; each additional 25 sq cm wound surface area, or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	15277	Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area greater than or equal to 100 sq cm; first 100 sq cm wound surface area, or 1% of body area of infants and children	Yes	CareCore National	
Other Services	Experimental / Investigational	15278	Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area greater than or equal to 100 sq cm; each additional 100 sq cm wound surface area, or part thereof, or each additional 1% of body area of infants and children, or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Potentially Cosmetic	15769	Grafting of autologous soft tissue, other, harvested by direct excision (eg, fat, dermis, fascia)	Yes	CareCore National	

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Other Services	Potentially Cosmetic	15771	Grafting of autologous fat harvested by liposuction technique to trunk, breasts, scalp, arms, and/or legs; 50 cc or less injectate	Yes	CareCore National	
Other Services	Potentially Cosmetic	15772	Grafting of autologous fat harvested by liposuction technique to trunk, breasts, scalp, arms, and/or legs; each additional 50 cc injectate, or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Potentially Cosmetic	15773	Grafting of autologous fat harvested by liposuction technique to face, eyelids, mouth, neck, ears, orbits, genitalia, hands, and/or feet; 25 cc or less injectate	Yes	CareCore National	
Other Services	Potentially Cosmetic	15774	Grafting of autologous fat harvested by liposuction technique to face, eyelids, mouth, neck, ears, orbits, genitalia, hands, and/or feet; each additional 25 cc injectate, or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Potentially Cosmetic	15777	Implantation of biologic implant (eg, acellular dermal matrix) for soft tissue reinforcement (ie, breast, trunk) (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	15778	Implantation of absorbable mesh or other prosthesis for delayed closure of defect(s) (ie, external genitalia, perineum, abdominal wall) due to soft tissue infection or trauma	Yes	CareCore National	
Other Services	Potentially Cosmetic	15786	Abrasion; single lesion (eg, keratosis, scar)	Yes	CareCore National	
Other Services	Potentially Cosmetic	15787	Abrasion; each additional 4 lesions or less (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Potentially Cosmetic	15820	Blepharoplasty, lower eyelid;	Yes	CareCore National	
Other Services	Potentially Cosmetic	15821	Blepharoplasty, lower eyelid; with extensive herniated fat pad	Yes	CareCore National	
Other Services	Potentially Cosmetic	15822	Blepharoplasty, upper eyelid;	Yes	CareCore National	
Other Services	Potentially Cosmetic	15823	Blepharoplasty, upper eyelid; with excessive skin weighting down lid	Yes	CareCore National	
Other Services	Potentially Cosmetic	15824	Rhytidectomy; forehead	Yes	CareCore National	
Other Services	Potentially Cosmetic	15825	Rhytidectomy; neck with platysmal tightening (platysmal flap, P-flap)	Yes	CareCore National	
Other Services	Potentially Cosmetic	15828	Rhytidectomy; cheek, chin, and neck	Yes	CareCore National	
Other Services	Potentially Cosmetic	15829	Rhytidectomy; superficial musculoaponeurotic system (SMAS) flap	Yes	CareCore National	
Other Services	Potentially Cosmetic	15830	Excision, excessive skin and subcutaneous tissue (includes lipectomy); abdomen, infraumbilical panniculectomy	Yes	CareCore National	
Other Services	Potentially Cosmetic	15832	Excision, excessive skin and subcutaneous tissue (includes lipectomy); thigh	Yes	CareCore National	
Other Services	Potentially Cosmetic	15833	Excision, excessive skin and subcutaneous tissue (includes lipectomy); leg	Yes	CareCore National	
Other Services	Potentially Cosmetic	15834	Excision, excessive skin and subcutaneous tissue (includes lipectomy); hip	Yes	CareCore National	
Other Services	Potentially Cosmetic	15835	Excision, excessive skin and subcutaneous tissue (includes lipectomy); buttock	Yes	CareCore National	
Other Services	Potentially Cosmetic	15836	Excision, excessive skin and subcutaneous tissue (includes lipectomy); arm	Yes	CareCore National	
Other Services	Potentially Cosmetic	15837	Excision, excessive skin and subcutaneous tissue (includes lipectomy); forearm or hand	Yes	CareCore National	
Other Services	Potentially Cosmetic	15838	Excision, excessive skin and subcutaneous tissue (includes lipectomy); submental fat pad	Yes	CareCore National	
Other Services	Potentially Cosmetic	15839	Excision, excessive skin and subcutaneous tissue (includes lipectomy); other area	Yes	CareCore National	
Other Services	Potentially Cosmetic	15847	Excision, excessive skin and subcutaneous tissue (includes lipectomy), abdomen (eg, abdominoplasty) (includes umbilical transposition and fascial plication) (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Potentially Cosmetic	15876	Suction assisted lipectomy; head and neck	Yes	CareCore National	
Other Services	Potentially Cosmetic	15877	Suction assisted lipectomy; trunk	Yes	CareCore National	
Other Services	Potentially Cosmetic	15878	Suction assisted lipectomy; upper extremity	Yes	CareCore National	
Other Services	Potentially Cosmetic	15879	Suction assisted lipectomy; lower extremity	Yes	CareCore National	
Other Services	Potentially Cosmetic	17106	Destruction of cutaneous vascular proliferative lesions (eg, laser technique); less than 10 sq cm	Yes	CareCore National	
Other Services	Potentially Cosmetic	17107	Destruction of cutaneous vascular proliferative lesions (eg, laser technique); 10.0 to 50.0 sq cm	Yes	CareCore National	
Other Services	Potentially Cosmetic	17108	Destruction of cutaneous vascular proliferative lesions (eg, laser technique); over 50.0 sq cm	Yes	CareCore National	
Other Services	Potentially Cosmetic	17999	Unlisted procedure, skin, mucous membrane and subcutaneous tissue	Yes	CareCore National	
Other Services	Potentially Cosmetic	19300	Mastectomy for gynecomastia	Yes	CareCore National	

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Other Services	Potentially Cosmetic	19316	Mastopexy	Yes	CareCore National	
Other Services	Potentially Cosmetic	19318	Breast reduction	Yes	CareCore National	
Other Services	Potentially Cosmetic	19325	Breast augmentation with implant	Yes	CareCore National	
Other Services	Potentially Cosmetic	19328	Removal of intact breast implant	Yes	CareCore National	
Other Services	Potentially Cosmetic	19330	Removal of ruptured breast implant, including implant contents (eg, saline, silicone gel)	Yes	CareCore National	
Other Services	Potentially Cosmetic	19340	Insertion of breast implant on same day of mastectomy (ie, immediate)	Yes	CareCore National	
Other Services	Potentially Cosmetic	19342	Insertion or replacement of breast implant on separate day from mastectomy	Yes	CareCore National	
Other Services	Potentially Cosmetic	19350	Nipple/areola reconstruction	Yes	CareCore National	
Other Services	Potentially Cosmetic	19355	Correction of inverted nipples	Yes	CareCore National	
Other Services	Potentially Cosmetic	19357	Tissue expander placement in breast reconstruction, including subsequent expansion(s)	Yes	CareCore National	
Other Services	Potentially Cosmetic	19370	Revision of peri-implant capsule, breast, including capsulotomy, capsulorrhaphy, and/or partial capsulectomy	Yes	CareCore National	
Other Services	Potentially Cosmetic	19371	Peri-implant capsulectomy, breast, complete, including removal of all intracapsular contents	Yes	CareCore National	
Other Services	Potentially Cosmetic	19380	Revision of reconstructed breast (eg, significant removal of tissue, re-advancement and/or re-inset of flaps in autologous reconstruction or significant capsular revision combined with soft tissue excision in implant-based reconstruction)	Yes	CareCore National	
Other Services	Experimental / Investigational	19499	Unlisted procedure, breast	Yes	CareCore National	
Other Services	Potentially Cosmetic	20910	Cartilage graft; costochondral	Yes	CareCore National	
Other Services	Potentially Cosmetic	20912	Cartilage graft; nasal septum	Yes	CareCore National	
Other Services	Outpatient Surgery	21025	Excision of bone (eg, for osteomyelitis or bone abscess); mandible	Yes	CareCore National	
Other Services	Outpatient Surgery	21050	Condylectomy, temporomandibular joint	Yes	CareCore National	
Other Services	Outpatient Surgery	21060	Meniscectomy, partial or complete, temporomandibular joint	Yes	CareCore National	
Other Services	Experimental / Investigational	21073	Manipulation of temporomandibular joint(s) (TMJ), therapeutic, requiring an anesthesia service (ie, general or monitored anesthesia care)	Yes	CareCore National	
Other Services	Outpatient Surgery	21085	Impression and custom preparation; oral surgical splint	Yes	CareCore National	
Other Services	Outpatient Surgery	21088	Impression and custom preparation; facial prosthesis	Yes	CareCore National	
Other Services	Unlisted Procedure	21089	Unlisted maxillofacial prosthetic procedure	Yes	CareCore National	
Other Services	Outpatient Surgery	21110	Application of interdental fixation device for conditions other than fracture or dislocation, includes removal	Yes	CareCore National	
Other Services	Potentially Cosmetic	21120	Genioplasty; augmentation (autograft, allograft, prosthetic material)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21121	Genioplasty; sliding osteotomy, single piece	Yes	CareCore National	
Other Services	Potentially Cosmetic	21122	Genioplasty; sliding osteotomies, 2 or more osteotomies (eg, wedge excision or bone wedge reversal for asymmetrical chin)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21123	Genioplasty; sliding, augmentation with interpositional bone grafts (includes obtaining autografts)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21125	Augmentation, mandibular body or angle; prosthetic material	Yes	CareCore National	
Other Services	Potentially Cosmetic	21127	Augmentation, mandibular body or angle; with bone graft, onlay or interpositional (includes obtaining autograft)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21137	Reduction forehead; contouring only	Yes	CareCore National	
Other Services	Potentially Cosmetic	21138	Reduction forehead; contouring and application of prosthetic material or bone graft (includes obtaining autograft)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21139	Reduction forehead; contouring and setback of anterior frontal sinus wall	Yes	CareCore National	
Other Services	Potentially Cosmetic	21141	Reconstruction midface, LeFort I; single piece, segment movement in any direction (eg, for Long Face Syndrome), without bone graft	Yes	CareCore National	
Other Services	Potentially Cosmetic	21142	Reconstruction midface, LeFort I; 2 pieces, segment movement in any direction, without bone graft	Yes	CareCore National	

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Other Services	Potentially Cosmetic	21143	Reconstruction midface, LeFort I; 3 or more pieces, segment movement in any direction, without bone graft	Yes	CareCore National	
Other Services	Potentially Cosmetic	21145	Reconstruction midface, LeFort I; single piece, segment movement in any direction, requiring bone grafts (includes obtaining autografts)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21146	Reconstruction midface, LeFort I; 2 pieces, segment movement in any direction, requiring bone grafts (includes obtaining autografts) (eg, ungrafted unilateral alveolar cleft)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21147	Reconstruction midface, LeFort I; 3 or more pieces, segment movement in any direction, requiring bone grafts (includes obtaining autografts) (eg, ungrafted bilateral alveolar cleft or multiple osteotomies)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21150	Reconstruction midface, LeFort II; anterior intrusion (eg, Treacher-Collins Syndrome)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21151	Reconstruction midface, LeFort II; any direction, requiring bone grafts (includes obtaining autografts)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21154	Reconstruction midface, LeFort III (extracranial), any type, requiring bone grafts (includes obtaining autografts); without LeFort I	Yes	CareCore National	
Other Services	Potentially Cosmetic	21155	Reconstruction midface, LeFort III (extracranial), any type, requiring bone grafts (includes obtaining autografts); with LeFort I	Yes	CareCore National	
Other Services	Potentially Cosmetic	21159	Reconstruction midface, LeFort III (extra and intracranial) with forehead advancement (eg, mono bloc), requiring bone grafts (includes obtaining autografts); without LeFort I	Yes	CareCore National	
Other Services	Potentially Cosmetic	21160	Reconstruction midface, LeFort III (extra and intracranial) with forehead advancement (eg, mono bloc), requiring bone grafts (includes obtaining autografts); with LeFort I	Yes	CareCore National	
Other Services	Potentially Cosmetic	21172	Reconstruction superior-lateral orbital rim and lower forehead, advancement or alteration, with or without grafts (includes obtaining autografts)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21179	Reconstruction, entire or majority of forehead and/or supraorbital rims; with grafts (allograft or prosthetic material)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21180	Reconstruction, entire or majority of forehead and/or supraorbital rims; with autograft (includes obtaining grafts)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21188	Reconstruction midface, osteotomies (other than LeFort type) and bone grafts (includes obtaining autografts)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21193	Reconstruction of mandibular rami, horizontal, vertical, C, or L osteotomy; without bone graft	Yes	CareCore National	
Other Services	Potentially Cosmetic	21194	Reconstruction of mandibular rami, horizontal, vertical, C, or L osteotomy; with bone graft (includes obtaining graft)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21195	Reconstruction of mandibular rami and/or body, sagittal split; without internal rigid fixation	Yes	CareCore National	
Other Services	Potentially Cosmetic	21196	Reconstruction of mandibular rami and/or body, sagittal split; with internal rigid fixation	Yes	CareCore National	
Other Services	Potentially Cosmetic	21198	Osteotomy, mandible, segmental;	Yes	CareCore National	
Other Services	Potentially Cosmetic	21199	Osteotomy, mandible, segmental; with genioglossus advancement	Yes	CareCore National	
Other Services	Potentially Cosmetic	21206	Osteotomy, maxilla, segmental (eg, Wassmund or Schuchard)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21208	Osteoplasty, facial bones; augmentation (autograft, allograft, or prosthetic implant)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21209	Osteoplasty, facial bones; reduction	Yes	CareCore National	
Other Services	Potentially Cosmetic	21210	Graft, bone; nasal, maxillary or malar areas (includes obtaining graft)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21215	Graft, bone; mandible (includes obtaining graft)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21230	Graft; rib cartilage, autogenous, to face, chin, nose or ear (includes obtaining graft)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21235	Graft; ear cartilage, autogenous, to nose or ear (includes obtaining graft)	Yes	CareCore National	
Other Services	Outpatient Surgery	21240	Arthroplasty, temporomandibular joint, with or without autograft (includes obtaining graft)	Yes	CareCore National	
Other Services	Outpatient Surgery	21243	Arthroplasty, temporomandibular joint, with prosthetic joint replacement	Yes	CareCore National	
Other Services	Potentially Cosmetic	21244	Reconstruction of mandible, extraoral, with transosteal bone plate (eg, mandibular staple bone plate)	Yes	CareCore National	
Other Services	Outpatient Surgery	21245	Reconstruction of mandible or maxilla, subperiosteal implant; partial	Yes	CareCore National	
Other Services	Outpatient Surgery	21246	Reconstruction of mandible or maxilla, subperiosteal implant; complete	Yes	CareCore National	
Other Services	Outpatient Surgery	21248	Reconstruction of mandible or maxilla, endosteal implant (eg, blade, cylinder); partial	Yes	CareCore National	
Other Services	Outpatient Surgery	21249	Reconstruction of mandible or maxilla, endosteal implant (eg, blade, cylinder); complete	Yes	CareCore National	
Other Services	Potentially Cosmetic	21270	Malar augmentation, prosthetic material	Yes	CareCore National	

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Other Services	Experimental / Investigational	21299	Unlisted craniofacial and maxillofacial procedure	Yes	CareCore National	
Other Services	Outpatient Surgery	21497	Interdental wiring, for condition other than fracture	Yes	CareCore National	
Other Services	Experimental / Investigational	21499	Unlisted musculoskeletal procedure, head	Yes	CareCore National	
Other Services	Outpatient Surgery	21685	Hyoid myotomy and suspension	Yes	CareCore National	
Other Services	Potentially Cosmetic	21740	Reconstructive repair of pectus excavatum or carinatum; open	Yes	CareCore National	
Other Services	Potentially Cosmetic	21742	Reconstructive repair of pectus excavatum or carinatum; minimally invasive approach (Nuss procedure), without thoracoscopy	Yes	CareCore National	
Other Services	Experimental / Investigational	21743	Reconstructive repair of pectus excavatum or carinatum; minimally invasive approach (Nuss procedure), with thoracoscopy	Yes	CareCore National	
Other Services	Unlisted Procedure	21899	Unlisted procedure, neck or thorax	Yes	CareCore National	
Other Services	Potentially Cosmetic	22999	Unlisted procedure, abdomen, musculoskeletal system	Yes	CareCore National	
Other Services	Outpatient Surgery	28291	Hallux rigidus correction with cheilectomy, debridement and capsular release of the first metatarsophalangeal joint; with implant	Yes	CareCore National	
Other Services	Outpatient Surgery	29804	Arthroscopy, temporomandibular joint, surgical	Yes	CareCore National	
Other Services	Potentially Cosmetic	30150	Rhinectomy; partial	Yes	CareCore National	
Other Services	Potentially Cosmetic	30400	Rhinoplasty, primary; lateral and alar cartilages and/or elevation of nasal tip	Yes	CareCore National	
Other Services	Potentially Cosmetic	30410	Rhinoplasty, primary; complete, external parts including bony pyramid, lateral and alar cartilages, and/or elevation of nasal tip	Yes	CareCore National	
Other Services	Potentially Cosmetic	30420	Rhinoplasty, primary; including major septal repair	Yes	CareCore National	
Other Services	Potentially Cosmetic	30430	Rhinoplasty, secondary; minor revision (small amount of nasal tip work)	Yes	CareCore National	
Other Services	Potentially Cosmetic	30435	Rhinoplasty, secondary; intermediate revision (bony work with osteotomies)	Yes	CareCore National	
Other Services	Potentially Cosmetic	30450	Rhinoplasty, secondary; major revision (nasal tip work and osteotomies)	Yes	CareCore National	
Other Services	Potentially Cosmetic	30460	Rhinoplasty for nasal deformity secondary to congenital cleft lip and/or palate, including columellar lengthening; tip only	Yes	CareCore National	
Other Services	Potentially Cosmetic	30462	Rhinoplasty for nasal deformity secondary to congenital cleft lip and/or palate, including columellar lengthening; tip, septum, osteotomies	Yes	CareCore National	
Other Services	Potentially Cosmetic	30465	Repair of nasal vestibular stenosis (eg, spreader grafting, lateral nasal wall reconstruction)	Yes	CareCore National	
Other Services	Experimental / Investigational	30468	Repair of nasal valve collapse with subcutaneous/submucosal lateral wall implant(s)	Yes	CareCore National	
Other Services	Experimental / Investigational	30469	Repair of nasal valve collapse with low energy, temperature-controlled (ie, radiofrequency) subcutaneous/submucosal remodeling	Yes	CareCore National	
Other Services	Outpatient Surgery	30520	Septoplasty or submucous resection, with or without cartilage scoring, contouring or replacement with graft	Yes	CareCore National	
Other Services	Outpatient Surgery	30620	Septal or other intranasal dermatoplasty (does not include obtaining graft)	Yes	CareCore National	
Other Services	Experimental / Investigational	30999	Unlisted procedure, nose	Yes	CareCore National	
Other Services	Outpatient Surgery	31295	Nasal/sinus endoscopy, surgical, with dilation (eg, balloon dilation); maxillary sinus ostium, transnasal or via canine fossa	Yes	CareCore National	
Other Services	Outpatient Surgery	31296	Nasal/sinus endoscopy, surgical, with dilation (eg, balloon dilation); frontal sinus ostium	Yes	CareCore National	
Other Services	Outpatient Surgery	31297	Nasal/sinus endoscopy, surgical, with dilation (eg, balloon dilation); sphenoid sinus ostium	Yes	CareCore National	
Other Services	Outpatient Surgery	31298	Nasal/sinus endoscopy, surgical, with dilation (eg, balloon dilation); frontal and sphenoid sinus ostia	Yes	CareCore National	
Other Services	Experimental / Investigational	31299	Unlisted procedure, accessory sinuses	Yes	CareCore National	
Other Services	Unlisted Procedure	31599	Unlisted procedure, larynx	Yes	CareCore National	
Other Services	Unlisted Procedure	31899	Unlisted procedure, trachea, bronchi	Yes	CareCore National	
Other Services	Outpatient Surgery	32664	Thoracoscopy, surgical; with thoracic sympathectomy	Yes	CareCore National	
Other Services	Unlisted Procedure	32999	Unlisted procedure, lungs and pleura	Yes	CareCore National	

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Other Services	Experimental / Investigational	33289	Transcatheter implantation of wireless pulmonary artery pressure sensor for long-term hemodynamic monitoring, including deployment and calibration of the sensor, right heart catheterization, selective pulmonary catheterization, radiological supervision and interpretation, and pulmonary artery angiography, when performed	Yes	CareCore National	
Other Services	Outpatient Surgery	36514	Therapeutic apheresis; for plasma pheresis	Yes	CareCore National	
Other Services	Unlisted Procedure	38129	Unlisted laparoscopy procedure, spleen	Yes	CareCore National	
Other Services	Experimental / Investigational	38589	Unlisted laparoscopy procedure, lymphatic system	Yes	CareCore National	
Other Services	Experimental / Investigational	38999	Unlisted procedure, hemic or lymphatic system	Yes	CareCore National	
Other Services	Unlisted Procedure	39599	Unlisted procedure, diaphragm	Yes	CareCore National	
Other Services	Unlisted Procedure	40799	Unlisted procedure, lips	Yes	CareCore National	
Other Services	Experimental / Investigational	41512	Tongue base suspension, permanent suture technique	Yes	CareCore National	
Other Services	Experimental / Investigational	41599	Unlisted procedure, tongue, floor of mouth	Yes	CareCore National	
Other Services	Outpatient Surgery	41874	Alveoloplasty, each quadrant (specify)	Yes	CareCore National	
Other Services	Experimental / Investigational	42140	Uvulectomy, excision of uvula	Yes	CareCore National	
Other Services	Outpatient Surgery	42145	Palatopharyngoplasty (eg, uvulopalatopharyngoplasty, uvulopharyngoplasty)	Yes	CareCore National	
Other Services	Experimental / Investigational	42160	Destruction of lesion, palate or uvula (thermal, cryo or chemical)	Yes	CareCore National	
Other Services	Experimental / Investigational	42299	Unlisted procedure, palate, uvula	Yes	CareCore National	
Other Services	Unlisted Procedure	42699	Unlisted procedure, salivary glands or ducts	Yes	CareCore National	
Other Services	Unlisted Procedure	42999	Unlisted procedure, pharynx, adenoids, or tonsils	Yes	CareCore National	
Other Services	Experimental / Investigational	43210	Esophagogastroduodenoscopy, flexible, transoral; with esophagogastric fundoplasty, partial or complete, includes duodenoscopy when performed	Yes	CareCore National	
Other Services	Experimental / Investigational	43257	Esophagogastroduodenoscopy, flexible, transoral; with delivery of thermal energy to the muscle of lower esophageal sphincter and/or gastric cardia, for treatment of gastroesophageal reflux disease	Yes	CareCore National	
Other Services	Experimental / Investigational	43284	Laparoscopy, surgical, esophageal sphincter augmentation procedure, placement of sphincter augmentation device (ie, magnetic band), including cruroplasty when performed	Yes	CareCore National	
Other Services	Experimental / Investigational	43289	Unlisted laparoscopy procedure, esophagus	Yes	CareCore National	
Other Services	Experimental / Investigational	43290	Esophagogastroduodenoscopy, flexible, transoral; with deployment of intragastric bariatric balloon	Yes	CareCore National	
Other Services	Experimental / Investigational	43499	Unlisted procedure, esophagus	Yes	CareCore National	
Other Services	Outpatient Surgery	43644	Laparoscopy, surgical, gastric restrictive procedure; with gastric bypass and Roux-en-Y gastroenterostomy (roux limb 150 cm or less)	Yes	CareCore National	
Other Services	Outpatient Surgery	43645	Laparoscopy, surgical, gastric restrictive procedure; with gastric bypass and small intestine reconstruction to limit absorption	Yes	CareCore National	
Other Services	Experimental / Investigational	43659	Unlisted laparoscopy procedure, stomach	Yes	CareCore National	
Other Services	Outpatient Surgery	43770	Laparoscopy, surgical, gastric restrictive procedure; placement of adjustable gastric restrictive device (eg, gastric band and subcutaneous port components)	Yes	CareCore National	
Other Services	Outpatient Surgery	43771	Laparoscopy, surgical, gastric restrictive procedure; revision of adjustable gastric restrictive device component only	Yes	CareCore National	
Other Services	Outpatient Surgery	43772	Laparoscopy, surgical, gastric restrictive procedure; removal of adjustable gastric restrictive device component only	Yes	CareCore National	
Other Services	Outpatient Surgery	43773	Laparoscopy, surgical, gastric restrictive procedure; removal and replacement of adjustable gastric restrictive device component only	Yes	CareCore National	
Other Services	Outpatient Surgery	43774	Laparoscopy, surgical, gastric restrictive procedure; removal of adjustable gastric restrictive device and subcutaneous port components	Yes	CareCore National	
Other Services	Outpatient Surgery	43775	Laparoscopy, surgical, gastric restrictive procedure; longitudinal gastrectomy (ie, sleeve gastrectomy)	Yes	CareCore National	
Other Services	Outpatient Surgery	43881	Implantation or replacement of gastric neurostimulator electrodes, antrum, open	Yes	CareCore National	
Other Services	Outpatient Surgery	43886	Gastric restrictive procedure, open; revision of subcutaneous port component only	Yes	CareCore National	
Other Services	Outpatient Surgery	43888	Gastric restrictive procedure, open; removal and replacement of subcutaneous port component only	Yes	CareCore National	
Other Services	Outpatient Surgery	43889	Gastric restrictive procedure, transoral, endoscopic sleeve gastropasty (ESG), including argon plasma coagulation, when performed	Yes	CareCore National	

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Other Services	Experimental / Investigational	43999	Unlisted procedure, stomach	Yes	CareCore National	
Other Services	Experimental / Investigational	44238	Unlisted laparoscopy procedure, intestine (except rectum)	Yes	CareCore National	
Other Services	Unlisted Procedure	44799	Unlisted procedure, small intestine	Yes	CareCore National	
Other Services	Unlisted Procedure	44979	Unlisted laparoscopy procedure, appendix	Yes	CareCore National	
Other Services	Unlisted Procedure	45399	Unlisted procedure, colon	Yes	CareCore National	
Other Services	Unlisted Procedure	45999	Unlisted procedure, rectum	Yes	CareCore National	
Other Services	Experimental / Investigational	46707	Repair of anorectal fistula with plug (eg, porcine small intestine submucosa [SIS])	Yes	CareCore National	
Other Services	Experimental / Investigational	46999	Unlisted procedure, anus	Yes	CareCore National	
Other Services	Unlisted Procedure	47379	Unlisted laparoscopic procedure, liver	Yes	CareCore National	
Other Services	Unlisted Procedure	47399	Unlisted procedure, liver	Yes	CareCore National	
Other Services	Unlisted Procedure	47579	Unlisted laparoscopy procedure, biliary tract	Yes	CareCore National	
Other Services	Unlisted Procedure	47999	Unlisted procedure, biliary tract	Yes	CareCore National	
Other Services	Experimental / Investigational	48999	Unlisted procedure, pancreas	Yes	CareCore National	
Other Services	Unlisted Procedure	49329	Unlisted laparoscopy procedure, abdomen, peritoneum and omentum	Yes	CareCore National	
Other Services	Experimental / Investigational	49659	Unlisted laparoscopy procedure, hernioplasty, herniorrhaphy, herniotomy	Yes	CareCore National	
Other Services	Experimental / Investigational	49999	Unlisted procedure, abdomen, peritoneum and omentum	Yes	CareCore National	
Other Services	Unlisted Procedure	50949	Unlisted laparoscopy procedure, ureter	Yes	CareCore National	
Other Services	Experimental / Investigational	51721	Insertion of transurethral ablation transducer for delivery of thermal ultrasound for prostate tissue ablation, including suprapubic tube placement during the same session and placement of an endorectal cooling device, when performed	Yes	CareCore National	
Other Services	Experimental / Investigational	53451	Periurethral transperineal adjustable balloon continence device; bilateral insertion, including cystourethroscopy and imaging guidance	Yes	CareCore National	
Other Services	Experimental / Investigational	53452	Periurethral transperineal adjustable balloon continence device; unilateral insertion, including cystourethroscopy and imaging guidance	Yes	CareCore National	
Other Services	Outpatient Surgery	53865	Cystourethroscopy with insertion of temporary device for ischemic remodeling (ie, pressure necrosis) of bladder neck and prostate	Yes	CareCore National	
Other Services	Unlisted Procedure	53899	Unlisted procedure, urinary system	Yes	CareCore National	
Other Services	Outpatient Surgery	54125	Amputation of penis; complete	Yes	CareCore National	
Other Services	Potentially Cosmetic	54161	Circumcision, surgical excision other than clamp, device, or dorsal slit; older than 28 days of age	Yes	CareCore National	
Other Services	Outpatient Surgery	54400	Insertion of penile prosthesis; non-inflatable (semi-rigid)	Yes	CareCore National	
Other Services	Outpatient Surgery	54401	Insertion of penile prosthesis; inflatable (self-contained)	Yes	CareCore National	
Other Services	Outpatient Surgery	54405	Insertion of multi-component, inflatable penile prosthesis, including placement of pump, cylinders, and reservoir	Yes	CareCore National	
Other Services	Outpatient Surgery	55880	Ablation of malignant prostate tissue, transrectal, with high intensity-focused ultrasound (HIFU), including ultrasound guidance	Yes	CareCore National	
Other Services	Experimental / Investigational	55881	Ablation of prostate tissue, transurethral, using thermal ultrasound, including magnetic resonance imaging guidance for, and monitoring of, tissue ablation	Yes	CareCore National	
Other Services	Experimental / Investigational	55882	Ablation of prostate tissue, transurethral, using thermal ultrasound, including magnetic resonance imaging guidance for, and monitoring of, tissue ablation; with insertion of transurethral ultrasound transducer for delivery of thermal ultrasound, including suprapubic tube placement and placement of an endorectal cooling device, when performed	Yes	CareCore National	
Other Services	Experimental / Investigational	55899	Unlisted procedure, male genital system	Yes	CareCore National	
Other Services	Outpatient Surgery	55970	Intersex surgery; male to female	Yes	CareCore National	
Other Services	Outpatient Surgery	55980	Intersex surgery; female to male	Yes	CareCore National	
Other Services	Potentially Cosmetic	56620	Vulvectomy simple; partial	Yes	CareCore National	
Other Services	Potentially Cosmetic	56805	Clitoroplasty for intersex state	Yes	CareCore National	

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Other Services	Potentially Cosmetic	57110	Vaginectomy, complete removal of vaginal wall;	Yes	CareCore National	
Other Services	Outpatient Surgery	57291	Construction of artificial vagina; without graft	Yes	CareCore National	
Other Services	Outpatient Surgery	57292	Construction of artificial vagina; with graft	Yes	CareCore National	
Other Services	Outpatient Surgery	57335	Vaginoplasty for intersex state	Yes	CareCore National	
Other Services	Experimental / Investigational	58578	Unlisted laparoscopy procedure, uterus	Yes	CareCore National	
Other Services	Experimental / Investigational	58579	Unlisted hysteroscopy procedure, uterus	Yes	CareCore National	
Other Services	Unlisted Procedure	58679	Unlisted laparoscopy procedure, oviduct, ovary	Yes	CareCore National	
Other Services	Experimental / Investigational	58999	Unlisted procedure, female genital system (nonobstetrical)	Yes	CareCore National	
Other Services	Unlisted Procedure	59897	Unlisted fetal invasive procedure, including ultrasound guidance, when performed	Yes	CareCore National	
Other Services	Outpatient Surgery	60660	Ablation of 1 or more thyroid nodule(s), one lobe or the isthmus, percutaneous, including imaging guidance, radiofrequency	Yes	CareCore National	
Other Services	Outpatient Surgery	60661	Ablation of 1 or more thyroid nodule(s), additional lobe, percutaneous, including imaging guidance, radiofrequency (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Unlisted Procedure	60699	Unlisted procedure, endocrine system	Yes	CareCore National	
Other Services	Outpatient Surgery	61736	Laser interstitial thermal therapy (LITT) of lesion, intracranial, including burr hole(s), with magnetic resonance imaging guidance, when performed; single trajectory for 1 simple lesion	Yes	CareCore National	
Other Services	Outpatient Surgery	61737	Laser interstitial thermal therapy (LITT) of lesion, intracranial, including burr hole(s), with magnetic resonance imaging guidance, when performed; multiple trajectories for multiple or complex lesion(s)	Yes	CareCore National	
Other Services	Experimental / Investigational	61886	Insertion or replacement of cranial neurostimulator pulse generator or receiver, direct or inductive coupling; with connection to 2 or more electrode arrays	Yes	CareCore National	
Other Services	Outpatient Surgery	61889	Insertion of skull-mounted cranial neurostimulator pulse generator or receiver, including craniectomy or craniotomy, when performed, with direct or inductive coupling, with connection to depth and/or cortical strip electrode array(s)	Yes	CareCore National	
Other Services	Outpatient Surgery	64553	Percutaneous implantation of neurostimulator electrode array; cranial nerve	Yes	CareCore National	
Other Services	EIU	64567	Percutaneous electrical nerve field stimulation, cranial nerves, without implantation	Yes	CareCore National	
Other Services	Experimental / Investigational	64590	Insertion or replacement of peripheral, sacral, or gastric neurostimulator pulse generator or receiver, requiring pocket creation and connection between electrode array and pulse generator or receiver	Yes	CareCore National	
Other Services	EIU	64654	Initial open implantation of baroreflex activation therapy (BAT) modulation system, including lead placement onto the carotid sinus, lead tunnelling, connection to a pulse generator placed in a distant subcutaneous pocket (ie, total system), and intraoperative interrogation and programming	Yes	CareCore National	
Crossover Code for: • Primary Program: Other Services • Companion Program: Musculoskeletal (MSK) - Spine Surgery  (See External Notation column for more details.)	Outpatient Surgery	64714	Neuroplasty, major peripheral nerve, arm or leg, open; lumbar plexus	Yes	CareCore National	This is a crossover code that can be requested under two programs: MSK Spine Surgery or Other Services.  • If your request is intended to be used in conjunction with MSK Spine Surgery, please submit your request under the MSK Spine program through the CareCoreNational platform.
Other Services	EIU	64910	Nerve repair; with synthetic conduit or vein allograft (eg, nerve tube), each nerve	Yes	CareCore National	
Crossover Code for: • Primary Program: Other Services • Companion Program: Musculoskeletal - Joint / Spine Surgery  (See External Notation column for more details.)	Unlisted Procedure	64999	Unlisted procedure, nervous system	Yes	CareCore National	This is a crossover code that can be requested under three programs: <b>MSK Joint, MSK Spine Surgery or Other Services.</b> • If your request is intended to be used for <b>Other Services</b> , please submit your request under the <b>Other Services program</b> through the <b>CareCoreNational platform.</b> • If your request is intended to be used for <b>MSK Spine Surgery</b> , please submit your request under the <b>MSK Spine program</b> through the <b>CareCoreNational platform.</b> • If your request is intended to be used for <b>MSK Joint Surgery</b> , please submit your request under the <b>Other Services program</b> through the <b>Medsolutions platform.</b>

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Other Services	Experimental / Investigational	65710	Keratoplasty (corneal transplant); anterior lamellar	Yes	CareCore National	
Other Services	Experimental / Investigational	65760	Keratomileusis	Yes	CareCore National	
Other Services	Potentially Cosmetic	65772	Corneal relaxing incision for correction of surgically induced astigmatism	Yes	CareCore National	
Other Services	Experimental / Investigational	65785	Implantation of intrastromal corneal ring segments	Yes	CareCore National	
Other Services	Outpatient Surgery	66174	Transluminal dilation of aqueous outflow canal (eg, canaloplasty); without retention of device or stent	Yes	CareCore National	
Other Services	Outpatient Surgery	66175	Transluminal dilation of aqueous outflow canal (eg, canaloplasty); with retention of device or stent	Yes	CareCore National	
Other Services	Outpatient Surgery	66179	Aqueous shunt to extraocular equatorial plate reservoir, external approach; without graft	Yes	CareCore National	
Other Services	Outpatient Surgery	66183	Insertion of anterior segment aqueous drainage device, without extraocular reservoir, external approach	Yes	CareCore National	
Other Services	Experimental / Investigational	66683	Implantation of iris prosthesis, including suture fixation and repair or removal of iris, when performed	Yes	CareCore National	
Other Services	Experimental / Investigational	66999	Unlisted procedure, anterior segment of eye	Yes	CareCore National	
Other Services	Unlisted Procedure	67299	Unlisted procedure, posterior segment	Yes	CareCore National	
Other Services	Potentially Cosmetic	67900	Repair of brow ptosis (supraciliary, mid-forehead or coronal approach)	Yes	CareCore National	
Other Services	Potentially Cosmetic	67901	Repair of blepharoptosis; frontalis muscle technique with suture or other material (eg, banked fascia)	Yes	CareCore National	
Other Services	Potentially Cosmetic	67902	Repair of blepharoptosis; frontalis muscle technique with autologous fascial sling (includes obtaining fascia)	Yes	CareCore National	
Other Services	Potentially Cosmetic	67903	Repair of blepharoptosis; (tarso) levator resection or advancement, internal approach	Yes	CareCore National	
Other Services	Potentially Cosmetic	67904	Repair of blepharoptosis; (tarso) levator resection or advancement, external approach	Yes	CareCore National	
Other Services	Potentially Cosmetic	67906	Repair of blepharoptosis; superior rectus technique with fascial sling (includes obtaining fascia)	Yes	CareCore National	
Other Services	Potentially Cosmetic	67908	Repair of blepharoptosis; conjunctivo-tarso-Muller's muscle-levator resection (eg, Fasanella-Servat type)	Yes	CareCore National	
Other Services	Potentially Cosmetic	67911	Correction of lid retraction	Yes	CareCore National	
Other Services	Unlisted Procedure	67999	Unlisted procedure, eyelids	Yes	CareCore National	
Other Services	Unlisted Procedure	68899	Unlisted procedure, lacrimal system	Yes	CareCore National	
Other Services	Potentially Cosmetic	69300	Otoplasty, protruding ear, with or without size reduction	Yes	CareCore National	
Other Services	Potentially Cosmetic	69399	Unlisted procedure, external ear	Yes	CareCore National	
Other Services	Outpatient Surgery	69705	Nasopharyngoscopy, surgical, with dilation of eustachian tube (ie, balloon dilation); unilateral	Yes	CareCore National	
Other Services	Outpatient Surgery	69706	Nasopharyngoscopy, surgical, with dilation of eustachian tube (ie, balloon dilation); bilateral	Yes	CareCore National	
Other Services	Potentially Cosmetic	69714	Implantation, osseointegrated implant, skull; with percutaneous attachment to external speech processor	Yes	CareCore National	
Other Services	Outpatient Surgery	69716	Implantation, osseointegrated implant, skull; with magnetic transcutaneous attachment to external speech processor, within the mastoid and/or resulting in removal of less than 100 sq mm surface area of bone deep to the outer cranial cortex	Yes	CareCore National	
Other Services	Experimental / Investigational	69799	Unlisted procedure, middle ear	Yes	CareCore National	
Other Services	Outpatient Surgery	69930	Cochlear device implantation, with or without mastoidectomy	Yes	CareCore National	
Other Services	Unlisted Procedure	69949	Unlisted procedure, inner ear	Yes	CareCore National	
Other Services	Unlisted Procedure	91299	Unlisted diagnostic gastroenterology procedure	Yes	CareCore National	
Other Services	Experimental / Investigational	93799	Unlisted cardiovascular service or procedure	Yes	CareCore National	
Other Services	Unlisted Procedure	94799	Unlisted pulmonary service or procedure	Yes	CareCore National	
Other Services	Potentially Cosmetic	96920	Excimer laser treatment for psoriasis; total area less than 250 sq cm	Yes	CareCore National	
Other Services	Potentially Cosmetic	96921	Excimer laser treatment for psoriasis; 250 sq cm to 500 sq cm	Yes	CareCore National	

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Other Services	Potentially Cosmetic	96922	Excimer laser treatment for psoriasis; over 500 sq cm	Yes	CareCore National	
Other Services	Experimental / Investigational	99183	Physician or other qualified health care professional attendance and supervision of hyperbaric oxygen therapy, per session	Yes	CareCore National	
Other Services	Unlisted Procedure	99199	Unlisted special service, procedure or report	Yes	CareCore National	
Other Services	Experimental / Investigational	0232T	Injection(s), platelet rich plasma, any site, including image guidance, harvesting and preparation when performed	Yes	CareCore National	
Other Services	Experimental / Investigational	0441T	Ablation, percutaneous, cryoablation, includes imaging guidance; lower extremity distal/peripheral nerve	Yes	CareCore National	
Other Services	Experimental / Investigational	0442T	Ablation, percutaneous, cryoablation, includes imaging guidance; nerve plexus or other truncal nerve (eg, brachial plexus, pudendal nerve)	Yes	CareCore National	
Other Services	Outpatient Surgery	0449T	Insertion of aqueous drainage device, without extraocular reservoir, internal approach, into the subconjunctival space; initial device	Yes	CareCore National	
Other Services	Outpatient Surgery	0479T	Fractional ablative laser fenestration of burn and traumatic scars for functional improvement; first 100 cm2 or part thereof, or 1% of body surface area of infants and children	Yes	CareCore National	
Other Services	Outpatient Surgery	0480T	Fractional ablative laser fenestration of burn and traumatic scars for functional improvement; each additional 100 cm2, or each additional 1% of body surface area of infants and children, or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	0571T	Insertion or replacement of implantable cardioverter-defibrillator system with substernal electrode(s), including all imaging guidance and electrophysiological evaluation (includes defibrillation threshold evaluation, induction of arrhythmia, evaluation of sensing for arrhythmia termination, and programming or reprogramming of sensing or therapeutic parameters), when performed	Yes	CareCore National	
Other Services	Experimental / Investigational	0600T	Ablation, irreversible electroporation; 1 or more tumors per organ, other than liver or prostate, including imaging guidance, when performed, percutaneous	Yes	CareCore National	
Other Services	Experimental / Investigational	0601T	Ablation, irreversible electroporation; 1 or more tumors per organ, including fluoroscopic and ultrasound guidance, when performed, open	Yes	CareCore National	
Other Services	Outpatient Surgery	0671T	Insertion of anterior segment aqueous drainage device into the trabecular meshwork, without external reservoir, and without concomitant cataract removal, one or more	Yes	CareCore National	
Other Services	Experimental / Investigational	0807T	Pulmonary tissue ventilation analysis using software-based processing of data from separately captured cinefluorograph images; in combination with previously acquired computed tomography (CT) images, including data preparation and transmission, quantification of pulmonary tissue ventilation, data review, interpretation and report	Yes	CareCore National	
Other Services	Experimental / Investigational	0808T	Pulmonary tissue ventilation analysis using software-based processing of data from separately captured cinefluorograph images; in combination with computed tomography (CT) images taken for the purpose of pulmonary tissue ventilation analysis, including data preparation and transmission, quantification of pulmonary tissue ventilation, data review, interpretation and report	Yes	CareCore National	
Other Services	Experimental / Investigational	0813T	Esophagogastroduodenoscopy, flexible, transoral, with volume adjustment of intragastric bariatric balloon	Yes	CareCore National	
Other Services	Outpatient Surgery	0908T	Open implantation of integrated neurostimulation system, vagus nerve, including analysis and programming, when performed	Yes	CareCore National	
Other Services	Experimental / Investigational	0933T	Transcatheter implantation of wireless left atrial pressure sensor for long-term left atrial pressure monitoring, including sensor calibration and deployment, right heart catheterization, transseptal puncture, imaging guidance, and radiological supervision and interpretation	Yes	CareCore National	
Other Services	Experimental / Investigational	0947T	Magnetic resonance image guided low intensity focused ultrasound (MRgFUS), stereotactic blood-brain barrier disruption using microbubble resonators to increase the concentration of blood-based biomarkers of target, intracranial, including stereotactic navigation and frame placement, when performed	Yes	CareCore National	
Other Services	Outpatient Surgery	0950T	Ablation of benign prostate tissue, transrectal, with high intensity–focused ultrasound (HIFU), including ultrasound guidance	Yes	CareCore National	
Other Services	Experimental / Investigational	0951T	Totally implantable active middle ear hearing implant; initial placement, including mastoidectomy, placement of and attachment to sound processor	Yes	CareCore National	
Other Services	Experimental / Investigational	0956T	Partial craniectomy, channel creation, and tunneling of electrode for sub-scalp implantation of an electrode array, receiver, and telemetry unit for continuous bilateral electroencephalography monitoring system, including imaging guidance	Yes	CareCore National	
Other Services	Experimental / Investigational	0957T	Revision of sub-scalp implanted electrode array, receiver, and telemetry unit for electrode, when required, including imaging guidance	Yes	CareCore National	
Other Services	Experimental / Investigational	0959T	Removal or replacement of magnet from coil assembly that is connected to continuous bilateral electroencephalography monitoring system, including imaging guidance	Yes	CareCore National	
Other Services	Experimental / Investigational	0960T	Replacement of sub-scalp implanted electrode array, receiver, and telemetry unit with tunneling of electrode for continuous bilateral electroencephalography monitoring system, including imaging guidance	Yes	CareCore National	
Other Services	Experimental / Investigational	0967T	Transanal insertion of endoluminal temporary colorectal anastomosis protection device, including vacuum anchoring component and flexible sheath connected to external vacuum source and monitoring system	Yes	CareCore National	
Other Services	Experimental / Investigational	0968T	Insertion or replacement of epicranial neurostimulator system, including electrode array and pulse generator, with connection to electrode array	Yes	CareCore National	
Other Services	Experimental / Investigational	0978T	Submucosal cryolysis therapy; soft palate, base of tongue, and lingual tonsil	Yes	CareCore National	
Other Services	Experimental / Investigational	0979T	Submucosal cryolysis therapy; soft palate only	Yes	CareCore National	
Other Services	Experimental / Investigational	0980T	Submucosal cryolysis therapy; base of tongue and lingual tonsil only	Yes	CareCore National	
Other Services	Experimental / Investigational	0981T	Transcatheter implantation of wireless inferior vena cava sensor for long-term hemodynamic monitoring, including deployment of the sensor, radiological supervision and interpretation, right heart catheterization, and inferior vena cava venography, when performed	Yes	CareCore National	

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Other Services	EIU	0990T	Transcervical instillation of biodegradable hydrogel materials, intrauterine	Yes	CareCore National	
Other Services	EIU	0991T	Cystourethroscopy, with low-energy lithotripsy and acoustically actuated microspheres, including imaging	Yes	CareCore National	
Other Services	EIU	0994T	Endovascular delivery of aortic wall stabilization drug therapy through a sheath positioned within an abdominal aortic aneurysm, with aortic roadmapping, balloon occlusion, imaging guidance, and radiological supervision and interpretation; percutaneous	Yes	CareCore National	
Other Services	EIU	0995T	Endovascular delivery of aortic wall stabilization drug therapy through a sheath positioned within an abdominal aortic aneurysm, with aortic roadmapping, balloon occlusion, imaging guidance, and radiological supervision and interpretation; open	Yes	CareCore National	
Other Services	Outpatient Surgery	0999T	Autologous muscle cell therapy, harvesting of muscle progenitor cells, including ultrasound guidance, when performed	Yes	CareCore National	
Other Services	Outpatient Surgery	1000T	Autologous muscle cell therapy, administration of muscle progenitor cells into the urethral sphincter, including cystoscopy and post-void residual ultrasound, when performed	Yes	CareCore National	
Other Services	Outpatient Surgery	1001T	Autologous muscle cell therapy, injection of muscle progenitor cells into the external anal sphincter, including ultrasound guidance, when performed	Yes	CareCore National	
Other Services	EIU	1003T	Arthroplasty, first carpometacarpal joint, with distal trapezial and proximal first metacarpal prosthetic replacement (eg, first carpometacarpal total joint)	Yes	CareCore National	
Other Services	EIU	1008T	Remote monitoring of sub-scalp implanted continuous bilateral electroencephalography monitoring system, device fitting, initial set-up, and patient education in wearing of system and use of equipment	Yes	CareCore National	
Other Services	EIU	1009T	Remote monitoring of a sub-scalp implanted continuous bilateral electroencephalography monitoring system, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation, and report, up to 30 days of recording without video	Yes	CareCore National	
Other Services	Outpatient Surgery	1019T	Lymphovenous bypass, including robotic assistance, when performed, per extremity	Yes	CareCore National	
Other Services	EIU	1025T	Alternating electric fields dosimetry and delivery-simulation modeling, creation and selection of patient-specific array layouts, and placement verification	Yes	CareCore National	
Other Services	Experimental / Investigational	A2004	Xcellistem, 1 mg	Yes	CareCore National	
Other Services	Experimental / Investigational	A2005	Microlyte matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	A2019	Kerecis omega3 marigen shield, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	A2020	Ac5 advanced wound system (ac5)	Yes	CareCore National	
Other Services	Experimental / Investigational	A2021	Neomatrix, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	C1607	Neurostimulator, integrated (implantable), rechargeable with all implantable and external components including charging system	Yes	CareCore National	
Other Services	Experimental / Investigational	C1839	Iris prosthesis	Yes	CareCore National	
Other Services	Experimental / Investigational	C1889	Implantable/insertable device, not otherwise classified	Yes	CareCore National	
Other Services	Experimental / Investigational	C2624	Implantable wireless pulmonary artery pressure sensor with delivery catheter, including all system components	Yes	CareCore National	
Other Services	Experimental / Investigational	C8002	Preparation of skin cell suspension autograft, automated, including all enzymatic processing and device components (do not report with manual suspension preparation)	Yes	CareCore National	
Other Services	Experimental / Investigational	C9352	Microporous collagen implantable tube (neuragen nerve guide), per centimeter length	Yes	CareCore National	
Other Services	Experimental / Investigational	C9353	Microporous collagen implantable slit tube (neurawrap nerve protector), per centimeter length	Yes	CareCore National	
Other Services	Experimental / Investigational	C9358	Dermal substitute, native, non-denatured collagen, fetal bovine origin (surgimend collagen matrix), per 0.5 square centimeters	Yes	CareCore National	
Other Services	Experimental / Investigational	C9360	Dermal substitute, native, non-denatured collagen, neonatal bovine origin (surgimend collagen matrix), per 0.5 square centimeters	Yes	CareCore National	
Other Services	Experimental / Investigational	C9364	Porcine implant, permacol, per square centimeter	Yes	CareCore National	
Other Services	Experimental / Investigational	C9727	Insertion of implants into the soft palate; minimum of three implants	Yes	CareCore National	
Other Services	Experimental / Investigational	C9734	Focused ultrasound ablation/therapeutic intervention, other than uterine leiomyomata, with magnetic resonance (mr) guidance	Yes	CareCore National	
Other Services	Experimental / Investigational	C9785	Endoscopic outlet reduction, gastric pouch application, with endoscopy and intraluminal tube insertion, if performed, including all system and tissue anchoring components	Yes	CareCore National	

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
<b>Crossover Code for:</b> <ul style="list-style-type: none"> <li>• <b>Primary Program:</b> Musculoskeletal - Pain Management</li> <li>• <b>Companion Program:</b> Other Services</li> </ul> <i>(See External Notation column for more details.)</i>	Musculoskeletal	C9807	Nerve stimulator, percutaneous, peripheral (e.g., sprint peripheral nerve stimulation system), including electrode and all disposable system components, non-opioid medical device (must be a qualifying medicare non-opioid medical device for post-surgical pain relief in accordance with section 4135 of the caa, 2023)	Yes	CareCore National	<p>This is a crossover code that can be requested under two programs: <b>MSK Pain Management</b> or <b>Other Services</b>.</p> <ul style="list-style-type: none"> <li>• If your request is intended to be used for <b>Other Services</b>, please submit your request under the <b>Other Services program</b> through the <b>CareCoreNational platform</b>.</li> <li>• If your request is intended to be used for <b>MSK Pain Management</b>, please submit your request under the <b>MSK program</b> through the <b>MedSolutions platform</b>.</li> </ul>
Other Services	Experimental / Investigational	C9808	Nerve cryoablation probe (e.g., cryoice, cryosphere, cryosphere max, cryoice cryosphere, cryoice cryo2), including probe and all disposable system components, non-opioid medical device (must be a qualifying medicare non-opioid medical device for post-surgical pain relief in accordance with section 4135 of the caa, 2023)	Yes	CareCore National	
Other Services	Experimental / Investigational	C9809	Cryoablation needle (e.g., iovera system), including needle/tip and all disposable system components, non-opioid medical device (must be a qualifying medicare non-opioid medical device for post-surgical pain relief in accordance with section 4135 of the caa, 2023)	Yes	CareCore National	
Other Services	Outpatient Surgery	G0166	External counterpulsation, per treatment session	Yes	CareCore National	
Other Services	Outpatient Surgery	G0422	Intensive cardiac rehabilitation; with or without continuous ecg monitoring with exercise, per session	Yes	CareCore National	
Other Services	Outpatient Surgery	G0423	Intensive cardiac rehabilitation; with or without continuous ecg monitoring; without exercise, per session	Yes	CareCore National	
Other Services	Experimental / Investigational	G0555	Provision of replacement patient electronics system (e.g., system pillow, handheld reader) for home pulmonary artery pressure monitoring	Yes	CareCore National	
Other Services	Outpatient Surgery	L8614	Cochlear device, includes all internal and external components	Yes	CareCore National	
Other Services	Experimental / Investigational	Q2026	Injection, radiesse, 0.1 ml	Yes	CareCore National	
Other Services	Potentially Cosmetic	Q2028	Injection, sculptra, 0.5 mg	Yes	CareCore National	
Other Services	Outpatient Surgery	Q4102	Oasis wound matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4103	Oasis burn matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4113	Graftjacket xpress, injectable, 1 cc	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4114	Integra flowable wound matrix, injectable, 1 cc	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4118	Matristem micromatrix, 1 mg	Yes	CareCore National	
Other Services	Outpatient Surgery	Q4122	Dermacell, dermacell awm or dermacell awm porous, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	Q4124	Oasis ultra tri-layer wound matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4125	Arthroflex, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4126	Memoderm, dermaspan, tranzgraft or integuply, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4128	Flex hd, or allopatch hd, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4130	Strattice tm, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	Q4132	Grafix core and grafixpl core, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4133	Grafix prime, grafixpl prime, stravix and stravixpl, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4137	Amnioexcel, amnioexcel plus or biodexcel, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4138	Biodfence dryflex, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4139	Amniomatrix or biodmatrix, injectable, 1 cc	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4140	Biodfence, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4148	Neox cord 1k, neox cord rt, or clarix cord 1k, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Other Services	Experimental / Investigational	Q4150	Allowrap ds or dry, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	Q4151	Amnioband or guardian, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4152	Dermapure, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4155	Neoxflo or clariflo, 1 mg	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4156	Neox 100 or clarix 100, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	Q4158	Kerecis omega3, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4159	Affinity, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4160	Nushield, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4162	Woundex flow, bioskin flow, 0.5 cc	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4163	Woundex, bioskin, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4164	Helicoll, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4166	Cyral, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4168	Amnioband, 1 mg	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4170	Cygnus, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4173	Palingen or palingen xplus, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4174	Palingen or promatr, 0.36 mg per 0.25 cc	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4180	Revita, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	Q4186	Epifix, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4187	Epicord, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4189	Artacent ac, 1 mg	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4192	Restorigin, 1 cc	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4193	Coll-e-derm, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4195	Puraply, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4196	Puraply am, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4215	Axolotl ambient or axolotl cryo, 0.1 mg	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4222	Progenamatrix, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4227	Amniocore, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4229	Cogenex amniotic membrane, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4234	Xcellerate, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4235	Amniorepair or altiply, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4236	Carepatch, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4239	Amnio-maxx or amnio-maxx lite, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4246	Coretext or protext, per cc	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4250	Amnioamp-mp, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4253	Zenith amniotic membrane, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	

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Other Services	Experimental / Investigational	Q4254	Novafix dl, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4262	Dual layer impax membrane, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4263	Surgraft tl, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4264	Cocoon membrane, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4265	Neostim tl, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4266	Neostim membrane, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4267	Neostim dl, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4268	Surgraft ft, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4269	Surgraft xt, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4270	Complete sl, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4271	Complete ft, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4272	Esano a, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4273	Esano aaa, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4274	Esano ac, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4275	Esano aca, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4276	Orion, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4331	Axolotl graft, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4332	Axolotl dualgraft, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4345	Matrix hd allograft dermis, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4361	Epixpress, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4383	Axolotl graft ultra, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4385	Apollo ft, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4386	Acesso trifaca, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4388	Neothelium 4l, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4389	Neothelium 4l+, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	Q4392	Grafix duo, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4393	Surgraft ac, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4394	Surgraft aca, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4395	Acelagraft, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4396	Natalin, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4397	Summit aaa, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	

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Other Services	EIU	Q4398	Summit ac, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	EIU	Q4399	Summit fx, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	EIU	Q4400	Polygon3 membrane, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	EIU	Q4401	Absolv3 membrane, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	EIU	Q4410	Amchomatrixdl, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	EIU	Q4411	Amniomatrixf4x, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	EIU	Q4413	Cygnus solo, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	EIU	Q4420	Nuform, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	

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