



Category	Procedure Code	Description
Long Acting Reversible Contraceptives	11976	removal, implantable contraceptive capsules
	11981	insertion of drug delivery implant into tissue
	11982	removal of drug delivery implant from tissue
	11983	removal with reinsertion of drug delivery implant into tissue
	57170	diaphragm or cervi cap fit w/instruction
	58300	insertion of intra-uterine device (iud)
	58301	removal of intrauterine device (iud)
	58340	catheterization and introduction of saline or contrast material for saline infusion sonohysterography (sis) or hysterosalpingography
	58565	hysteroscopy, surgical; with bilateral fallopian tube cannulation to induce occlusion by placement of permanent implants
	58611	ligation or transection of fallopian tube(s) when done at the time of cesarean delivery or intra-abdominal surgery (not a separate procedure) (list separately in addition to code for primary procedure)
	58615	occlusion of fall tube(s) by device vag
	58670	laparoscopy, surgical; with fulguration of oviducts (with or without transection)
	58671	laparoscopy, surgical; with occlusion of oviducts by device (eg, band, clip, or falope ring)
Cardiovascular system	36415	insertion of needle into vein for collection of blood sample
	36416	collection of capillary blood specimen (eg, finger, heel, ear stick)
Immunization administration	90460	immunization administration through 18 years of age via any route of administration, with counseling by physician or other qualified health care professional; first or only component of each vaccine or toxoid administered
	90471	immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); one vaccine (single or combination vaccine/toxoid)
	90472	immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); each additional vaccine (single or combination vaccine/toxoid) (list separately in addition to code for primary procedure)
	90473	immunization administration by intranasal or oral route; one vaccine (single or combination vaccine/toxoid)
	90474	immunization administration by intranasal or oral route; each additional vaccine (single or combination vaccine/toxoid) (list separately in addition to code for primary procedure)
E&M - Office/other outpatient	99201	new patient office or other outpatient visit, typically 10 minutes
	99202	new patient office or other outpatient visit, typically 20 minutes
	99203	new patient office or other outpatient visit, typically 30 minutes
	99204	new patient office or other outpatient visit, typically 45 minutes
	99205	new patient office or other outpatient visit, typically 60 minutes
	99211	office or other outpatient visit for the evaluation and management of an established patient, that may not require the presence of a physician or other qualified health care professional. usually, the presenting problem(s) are minimal. typically, 5 minutes are spent performing or supervising these
	99212	established patient office or other outpatient visit, typically 10 minutes
	99213	established patient office or other outpatient visit, typically 15 minutes
	99214	established patient office or other outpatient, visit typically 25 minutes
	99215	established patient office or other outpatient, visit typically 40 minutes
E&M -Nursing facility	99304	initial nursing facility visit, typically 25 minutes per day
	99305	initial nursing facility visit, typically 35 minutes per day
	99306	initial nursing facility visit, typically 45 minutes per day
	99307	subsequent nursing facility visit, typically 10 minutes per day
	99308	subsequent nursing facility visit, typically 15 minutes per day
	99309	subsequent nursing facility visit, typically 25 minutes per day
	99310	subsequent nursing facility visit, typically 35 minutes per day
	99315	nf discharge day mgmt 1 uos only
	99316	nf discharge day mgmt 1 uos only
	99318	nursing facility annual assessment, typically 30 minutes
E&M - Domiciliary, rest home	99324	new patient assisted living visit, typically 20 minutes
	99325	new patient assisted living visit, typically 30 minutes
	99326	new patient assisted living visit, typically 45 minutes
	99327	new patient assisted living visit, typically 60 minutes
	99328	new patient assisted living visit, typically 75 minutes
	99334	established patient assisted living visit, typically 15 minutes
	99335	established patient assisted living visit, typically 25 minutes
	99336	established patient assisted living visit, typically 40 minutes
	99337	established patient assisted living visit, typically 60 minutes
E&M - Home visits	99341	new patient home visit, typically 20 minutes
	99342	new patient home visit, typically 30 minutes
	99343	new patient home visit, typically 45 minutes
	99344	new patient home visit, typically 60 minutes
	99345	new patient home visit, typically 75 minutes
	99347	established patient home visit, typically 15 minutes
	99348	established patient home visit, typically 25 minutes
	99349	established patient home visit, typically 40 minutes
	99350	established patient home visit, typically 60 minutes





## Alternative Payment Model Code

Category	Procedure Code	Description
E&M - Preventive medicine	99381	initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; infant (age younger
	99382	initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; early childhood (age
	99383	initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; late childhood (age
	99384	initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; adolescent (age 12
	99385	initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; 18-39 years
	99386	initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; 40-64 years
	99387	initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; 65 years and older
	99391	established patient periodic preventive medicine examination infant younger than 1 year
	99392	established patient periodic preventive medicine examination, age 1 through 4 years
	99393	established patient periodic preventive medicine examination, age 5 through 11 years
	99394	established patient periodic preventive medicine examination, age 12 through 17 years
	99395	established patient periodic preventive medicine examination age 18-39 years
	99396	established patient periodic preventive medicine examination age 40-64 years
	99397	established patient periodic preventive medicine examination, age 65 years and older
	99401	preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 15 minutes
	99402	preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 30 minutes
	99403	preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 45 minutes
	99404	preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 60 minutes
	99406	smoking and tobacco use cessation counseling visit; intermediate, greater than 3 minutes up to 10 minutes
	99407	smoking and tobacco use cessation counseling visit; intensive, greater than 10 minutes
99411	preventive medicine counseling and/or risk factor reduction intervention(s) provided to individuals in a group setting (separate procedure); approximately 30 minutes	
99412	preventive medicine counseling and/or risk factor reduction intervention(s) provided to individuals in a group setting (separate procedure); approximately 60 minutes	
99415	prolonged office or other outpatient service by clinical staff - first hour	
99416	prolonged office or other outpatient service by clinical staff - each additional 30 minutes	
E&M - SBIRT	99408	alcohol and/or substance (other than tobacco) abuse structured screening (eg. audit, dast), and brief intervention (sbi) services; 15 to 30 minutes
	99409	alcohol and/or substance (other than tobacco) abuse structured screening (eg. audit, dast), and brief intervention (sbi) services; greater than 30 minutes
OB/GYN	Q0091	screening papanicolaou smear, cervical or vaginal, up to three smears, requiring interpretation by physician
	G0101	cerv/vag cancer screen pelvic/breast exam
	G0124	screening cytopathology,cervical or vaginal(any reporting system), automated thin layer preparation,screening by,requiring interpretation by a phsyician
Depression Screening	G8431	Screening for depression is documented as being positive and a follow-up plan is documented
	G8510	Screening for depression is documented as negative, a follow-up plan is not required

Total Number of Codes in Benefit Package

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