

2010  
NHP/NHIC Commercial  
Potentially Experimental Services  
Codes Requiring Prior Authorization  
8-2-2010

**All CPT and HCPCS codes listed below require prior authorization.** Codes may be used for more than one variation/method of a procedure. The experimental aspect may only apply to one application of the code, when the procedure is performed related to a specific diagnosis or in a certain age group. At times, review of the operative note/medical records is required to determine if the procedure billed is experimental. Unlisted codes may be used for potentially experimental/investigational services and are subject to review. Updates are made to this list as new issues arise or the investigational status of a service changes.

Procedure Code	Procedure Description	Additional Information
0016T through 0207T - All Category III Codes		Note: CPT may add codes to this category throughout the calendar year.
20696	Application of multiplane (pins or wires in more than one plane), unilateral, external fixation with stereotactic computer assisted adjustments (eg. Spatial frame), including imaging, initial and subsequent alignments, assessments and computations	
20697	Application of multiplane (pins or wires in more than one plane), unilateral, external fixation with stereotactic computer assisted adjustments (eg. Spatial frame), including imaging; exchange (ie. Removal and replacment) of strut, each	
20974	Electrical stimulation to aid bone healing, non-invasive	
20975	Electrical stimulation to aid bone healing, invasive	
20985	Computer assisted surgical navigation for musculoskeletal procedures. Image-less	
22505	Manipulation of spine, requiring anesthesia, any region	
22520	percutaneous vertebroplasty, one vertebral body, unilateral or bilateral injection, thoracic	
22521	percutaneous vertebroplasty, one vertebral body, unilateral or bilateral injection, lumbar	
22522	each additional thoracic or lumbar vertebral body (list in addition to primary code)	
22523	percutaneous vertebral augmentation, including cavity creation, fracture reduction and bone biopsy, using mechanical device, one vertebral body, unilateral or bilateral, thoracic (ex: kyphoplasty)	
22524	percutaneous vertebral augmentation, including cavity creation, fracture reduction and bone biopsy, using mechanical device, one vertebral body, unilateral or bilateral, lumbar (ex: kyphoplasty)	
22525	each additional thoracic or lumbar vertebral body (list separately)	
22862	Revision, including replacement of total disc arthroplasty, anterior approach, lumbar, single interspace	
22864	Removal of total disc arthroplasty, anterior approach cervical; single interspace	
22865	Removal of total disc arthroplasty, (artificial disc), anterior approach, lumbar, single interspace	
26556	Transfer free toe joint, with microvascular anastomosis	
27412	Autologous chondrocyte implantation	
27702	Arthroplasty with implant, total ankle replacement	
27703	Arthroplasty, revision, total ankle	

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27704	Removal of ankle implant	
29868	Meniscal allograft transplantation	
32998	Ablation therapy for reduction or eradication of one or more pulmonary tumor(s) including pleura or chest wall when involving by tumor extension, percutaneous, radiofrequency, unilateral	
33542	Ventriculectomy (myocardial resection)	
33548	Ventricular remodeling or restoration includes prosthetic patch ( CorRestore Patch System, SAVER and DOR)	
34806	Transcatheter placement of wireless physiologic sensor in aneurysmal sac during endovascular repair; including radiological supervision, interpretation, calibration and collection of pressure data	
35475	Transluminal percutaneous angioplasty with or without stent, brachiocephalic trunk or branches, each vessel	
35476	Transluminal percutaneous angioplasty with or without stent, venous, each vessel	
36515	Therapeutic apheresis; with extracorporeal immunoabsorption and plasma reinfusion	
36522	Photopheresis, extracorporeal	
37184	Primary percutaneous transluminal mechanical thrombectomy, initial vessel (Merci Retriever Device)	
37185	Primary percutaneous transluminal mechanical thrombectomy, (Merci Retriever Device), second and all subsequent vessels	
37186	Secondary percutaneous transluminal thrombectomy (non-primary mechanical, snare basket, suction technique)	
37215	Transcatheter placement of intravascular stents, cervical carotid artery, percutaneous with distal embolic protection	
37216	Transcatheter placement of intravascular stents, cervical carotid artery, percutaneous <b>without</b> embolic protection	
41120	Partial glossectomy (less than one half tongue)	
41512	Tongue base suspension, permanent suture technique	
43201	Esophagoscopy with direct submucosal injection, any substance, to treat reflux disease (Stretta procedure, Enteryx device, Gatekeeper device and EndoCinch device)	
43257	Upper Gastrointestinal Endoscopy with delivery of thermal energy to the muscle of the lower esophageal sphincter and/or gastric cardia, for treatment of gastroesophageal reflux disease (Stretta procedure)	
43775	Laparoscopy, surgical, gastric restrictive procedure; longitudinal gastrectomy (i.e. sleeve gastrectomy)	Procedures for the treatment of obesity and morbid obesity are directly excluded from coverage.
46707	Repair of anorectal fistula with plug (eg, porcine small intestine submucosa {SIS})	
50250	Ablation, open, one or more renal mass lesion(s), cryosurgical, including intraoperative ultrasound if performed	
50542	Laparoscopic ablation of renal tumor	
50592	Ablation, one or more renal tumor(s), percutaneous, radiofrequency	
50593	Cryoablation renal tumors, unilateral, percutaneous	
52327	Endoscopic subureteral injection for the treatment of vesicoureteral reflux (VUR) - Cystourethroscopy with subureteric injection of implant material	
55706	Biopsy, prostate, needle, saturation sampling for prostate mapping	
59897	unlisted fetal invasive procedure, including ultrasound guidance	

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61630	Intracranial balloon angioplasty with stenting (ex: Wingspan Stent System; Neurolink System)	
61850	Twist drill or burr hole(s) for implantation of neurostimulator electrodes, cortical	
61860	Craniectomy or craniotomy for implantation of neurostimulator electrodes, cerebral, cortical	
61863	Twist drill, burr hole, craniotomy or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site, without use of intraoperative microelectrode recording, first array	
61864	add on code, each additional array	
61867	Twist drill, burr hole, craniotomy or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site, with use of intraoperative microelectrode recording, first array	
61868	add on code, each additional array	
61870	craniectomy for implantation of neurostimulator electrodes, cerebellar; cortical	
61875	craniectomy for implantation of neurostimulator electrodes, cerebellar, subcortical	
61880	Revision or removal of intracranial neurostimulator electrodes	
61885	Insertion or replacment of cranial neurostimulator, pulse generator or receiver	
61886	Insertion or replacment of cranial neurostimulator, pulse generator or receiver with connection to two or more electode arrays	
61888	Revision or removal of cranial neurostimulator pulse generator or receiver	
62263	Percutaneous lysis of epidural adhesions, 2 or more sessions	
62264	Percutaneous lysis of epidural adhesions, 1 session	
62267	Percutaneous aspiration within the nucleus pulposus, intervertebral disc, or paravertebral tissue for diagnositic purposes	
62287	Disc Nucleoplasty, manual or automated percutaneous discectomy, lumbar; (aspiration or decompression procedure percutaneous of nucleus pulposus of intervetebral disc)	
62292	Disc Nucleoplasty cervical, thoracic or lumbar; Injection procedure for chemonucleolysis, including discography, intervertebral disc, single or multiple levels	
63620	Stereotactic radiosurgery (particle beam, gamma ray or linear accelerator; 1 spinal llesion	
63621	Stereotactic radiosurgery (particle beam, gamma ray or linear accelerator; each additional spinal lesion (list separately in addition to code for primary procedure)	
64553	Percutaneous implantation of neurostimulator electrodes, cranial nerve	
64555	Percutaneous implantation of neurostimulator electrodes; peripheral nerve (excludes sacral nerve)	
64560	Percutaneous implantation of neurostimulator electrodes; autonomic nerve	
64561	Percutaneous implantation of neurostimulator electrodes, sacral nerve (transforaminal placement)	
64565	Percutaneous implantation of neurostimulator electrodes, neuromuscular	

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64573	Incision for implantation of neurostimulator electrodes, cranial nerve	
64575	Incision for implantation of neurostimulator electrodes, peripheral nerve (excludes sacral nerve)	
64577	Incision for implantation of neurostimulator electrodes, autonomic nerve	
64580	Incision for implantation of neurostimulator electrodes, neuromuscular	
64581	Incision for implantation of stimulator sacral nerve (pelvic floor stimulation) (transforaminal placement)	
64585	Revision or removal of neurostimulator electrodes	
64590	Insertion or replacement of peripheral or gastric neurostimulator pulse generator or receiver, direct or inductive coupling	
64595	Revision or removal of peripheral or gastric neurostimulator pulse generator or receiver	
64622	Destruction by neurolytic agent, paravertebral facet joint nerve;lumbar or sacral, single level <b>when billed for radiofrequency neurolysis;</b>	
64623	Destruction by neurolytic agent, paravertebral facet joint nerve;lumbar or sacral, add on code for each additional level <b>when billed for radiofrequency neurolysis;</b>	
64626	Destruction by neurolytic agent, paravertebral facet joint nerve; cervical or thoracic, single level <b>when billed for radiofrequency neurolysis;</b>	
64627	Destruction by neurolytic agent, paravertebral facet joint nerve; cervical or thoracic, add on code for each additional level <b>when billed for radiofrequency neurolysis;</b>	
64632	Destruction by neurolytic agent; plantar common digital nerve	
64640	Destruction by neurolytic agent; other peripheral nerve or branch	
	Percutaneous Tibial Nerve Stimulation (PTNS)	
65770	Artificial cornea implant - Keratoprosthesis	
67220	Destruction of localized lesion, photocoagulation	
67221	photodynamic therapy includes intravenous infusion	
67225	Photodynamic therapy, second eye (add on code)	
76120	Dynamic spinal visualization - Cineradiography/videoradiography	
76125	Dynamic spinal visualization - Cineradiography/videoradiography to compliment routine exam (add on code used in addition to primary procedure)	
76800	Spinal ultrasound, diagnostic	
77520	Proton treatment delivery, simple without compensation	
77522	Proton treatment delivery, simple with compensation	
77523	Proton treatment, intermediate	
77525	Proton Treatment, complex	
77600	Hyperthermia, whole body, externally generated, superficial, heating to a depth of 4 cm or less	
77605	Hyperthermia, whole body, externally generated, deep, heating to a depth greater than 4 cm	
78607	Brain imaging, tomographic (Single photon emission computed tomography)	
82523	Collagen cross links	
83698	Lipoprotein Associated Phospholipase A2 (PLAC test)	
83876	Myeloperoxidase (MPO)	
83951	Oncoprotein; des-gamma-carboxy-prothrombin (DCP)	

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86001	Allergen specific IgG, quantitative or semi-quantitative	
86141	High sensitivity C-reactive protein (hs-CRP)	
86343	Leukocyte Histamine Release (LHRT) - allergy testing	
90670	Pneumococcal conjugate vaccine, 13 valent, for IM use	
90875	Individual psychophysiological therapy incorporating biofeedback training by any modality 20-30 minutes	
90876	Individual psychophysiological therapy incorporating biofeedback training by any modality 15-50 minutes	
90901	Biofeedback training by any modality	
90911	Biofeedback training, perineal muscles, anorectal or urethral sphincter, including EMG and manometry	
91110	Capsule endoscopy - esophogus through ileum * (not considered experimental in adults in some cases)	
91111	Capsule endoscopy - esophogus * (not considered experimental in adults in some cases)	
91132	Electrogastrography, diagnostic, transcutaneous	
91133	Electrogastrography, diagnostic, transcutaneous with provocative testing	
92512	nasal function studies (rhinomanometry) (also called acoustic rhinometry)	
93228	Wearable mobile cardiovascular telemetry with electrocardiographic recording, concurrent, computerized real time data analysis and greater than 24 hours of accessible ECG data storage (retrievable with query) with ECG triggered and patient selected events transmitted to a remote center for up to 30 days	
93229	Wearable mobile cardiovascular telemetry with electrocardiographic recording, concurrent, computerized real time data analysis and greater than 24 hours of accessible ECG data storage (retrievable with query) with ECG triggered and patient selected events transmitted to a remote surveillance center for up to 30 days; technical support; surveillance analysis and physician report	
93278	Signal Averaged ECG (SAECG)	
93701	Electircal Bioimpedance Cardiography (EB), thoracic	
93740	Temperature gradient studies; thermography	
93982	Non-invasive physiologic study of implanted wireless pressure sensor in aneurysmal sac following endovascular repair, complete study including recording analysis of pressure and wavelength tracings, interpretation and report	
94014	Patient initiated spirometric recording per 30-day period of time, includes education, transmission of tracing, data capture, analysis, periodic recalibration and physician review.	
94015	Patient initiated spirometric recording per 30-day period of time, includes education, transmission of tracing, data capture, analysis, periodic recalibration	
94016	Patient initiated spirometric recording physician review and interpretation only	
95012	Nitric oxide expired gas determination (exhaled nitric oxide measure)	
95060	Conjunctival Challenge Test (ophthalmic mucous membrane test - allergy testing)	
95065	Direct Nasal mucous membrane testing - allergy testing	
95803	Actigraphy testing, recording, analysis, interpretation (minimum of three day recording)	
95812	Electroencephalogram (EEG), extended monitoring, (and Digital analysis of EEG, see code 95957); (can be used for QEEG or brain mapping or neurofeedback)	

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95965	Magnetoencephalography (MEG)/Magnetic Source Imaging (MSI); recording and analysis	
95966	Magnetoencephalography (MEG)/Magnetic Source Imaging (MSI) for evoked magnetic fields, single modality	
95967	Magnetoencephalography (MEG)/Magnetic Source Imaging (MSI); for evoked magnetic fields, each additional modality	
95978	Electronic analysis of implanted neurostimulator pulse generator system, complex deep brain neurostimulator pulse, programming first hour	
95979	Electronic analysis of implanted neurostimulator pulse generator system, complex deep brain neurostimulator pulse, programming each additional 30 minutes (add on)	
95980	Electronic analysis of implanted neurostimulator pulse generator system; gastric neurostimulator pulse generator/transmitter; intraoperative with programming	
95981	Electronic analysis of implanted neurostimulator pulse generator system; gastric neurostimulator pulse generator/transmitter; subsequent, without reprogramming	
95982	Electronic analysis of implanted neurostimulator pulse generator system; gastric neurostimulator pulse generator/transmitter; subsequent, with programming	
96000	Comprehensive computer based motion analysis by video taping and 3-D kinematics	
96001	Comprehensive computer based motion analysis by video taping and 3-D kinematics - with dynamic plantar pressure measurements during walking	
96002	Dynamic surface electromyography during walking or other functional activities, 1-12 muscles	
96003	Dynamic fine wire electromyography, during walking or other functional activities, 1 muscle	
96004	Physician review and interpretation of comprehensive computer based motion analysis, dynamic plantar pressure measurements, dynamic surface electromyography during walking or other functional activities and dynamic fine wire electromyography, with written report	
96567	Photodynamic therapy of the skin	
96920	Laser treatment for inflammatory skin disease (psoriasis) area less than 250 square cm (VTRAC)	
96921	Laser treatment for inflammatory skin disease (psoriasis) area 250 square cm to 500 sq cm	
96922	Laser treatment for inflammatory skin disease (psoriasis) over 500 sq cm	
97533	Cognitive Rehabilitation - Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands	Sensory Integration and Developmental Delay are directly excluded from coverage.
99174	Occular photoscreening	
99183	Physician attendance and supervision of hyperbaric oxygen therapy, per session	
99500	Home visit for prenatal monitoring and assessment to include fetal heart rate, non-stress test, uterine monitoring, and gestational diabetes monitoring	
99512	Home visit for hemodialysis	
A4575	Topical hyperbaric oxygen chamber, disposable	
A4639	Replacement pad for home infrared heating system	
A6000	Non-contact wound warming wound cover for use with non-contact wound warming device and warming card	
C1300	Hyperbaric oxygen under pressure, full body chamber, per 30 minute interval	

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C1818	Integrated keratoprosthesis	
C9360	Dermal substitute, native, non-denatured collagen, neonatal bovine origin (SurgiMend Collagen Matrix) per 0.5 square cm	
C9362	Porous purified collagen matrix bone void filler (Integra Mozaik Osteoconductive Scaffold Strip) per 0.5 cc	
C9363	Skin substitute, Integra Meshed bilayer Wound Matrix, per square cm	
E0221	Infrared heating pad system	
E0231	Noncontact wound warming device (temperature control unit, AC adapter and power cord) for use with warming card and wound cover	
E0232	Warming care for use with noncontact wound warming device and noncontact wound warming cover	
E0481	Intrapulmonary percussive ventilation system and related accessories	
E0500	IPPB machine, all types, with built in nebulization, manual or automatic, internal or external power sources	
E0617	Automatic external defibrillators (wearable LifeVest)	
E0740	Incontinence treatment system, pelvic floor stimulator, monitor, sensor, and/or trainer	
E0744	Neuromuscular stimulator for scoliosis, home use	
E0745	Neuromuscular stimulator, electronic shock unit. (May also be called galvanic stimulation unit)	
E0746	Electromyography (EMG) Biofeedback device	
E0747	Osteogenesis stimulator, electrical, non-invasive, other than spinal	
E0748	Osteogenesis stimulator, electrical, invasive, spinal applications	
E0749	Osteogenesis stimulator, electrical, surgically implanted	
E0761	Electrical stimulator for wound healing - nonthermal pulsed high frequency radiowaves, high peak power electromagnetic treatment device	
E0762	Transcutaneous electrical joint stimulation device system	
E0764	Functional neuromuscular stimulator, transcutaneous stimulation of muscles used for walking with computer control	
E0769	Electrical stimulation or electromagnetic wound treatment device, not elsewhere classified	
E0770	Functional electrical stimulator, transcutaneous stimulation of nerve and/or muscle groups, any type, complete system, not otherwise classified	
E0830	ambulatory traction device (Orthotrac pneumatic compression spinal traction device)	
E0935	Continuous passive motion exercise device for use on knee only	
E0936	Continuous passive motion exercise device for use other than knee	
E1801	Static progressive stretch elbow device	
E1806	Static progressive stretch wrist device	
E1811	Static progressive stretch knee device	
E1815	Dynamic adjustable ankle extension/flexion device	
E1816	Static progressive stretch ankle device	
E1818	Static progressive stretch forearm device	
E1821	replacement soft interface material for static progressive stretch device	
E1830	Dynamic adjustable toe device	

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E1840	Dynamic adjustable shoulder device	
E1841	Static progressive stretch shoulder device	
E2120	Pulse generator system for tympanic treatment of inner ear endolymphatic fluid	
G0166	External Counterpulsation (EECP)	
G0255	Current Perception Threshold Testing/Sensory Nerve Conduction Threshold (SCNT), per limb, any nerve	
G0295	Electromagnetic therapy, to one or more areas for wound care	
G9147	Outpatient intravenous Insulin Treatment (OIVIT) either pulsatile or continuous, by any means, guided by the results of measurements for : respiratory quotient; and/or, urine urea nitrogen (UUN); and/or, arterial, venous or capillary glucose; and/or potassium concentration	
J7330	autologous cultured chondrocytes, implant (use this code for Carticel)	
L0112	Cranial cervical orthosis (Cranial Banding, Soft Shell Helmet)	
L0113	Cranial cervical orthosis (Cranial Banding, Soft Shell Helmet); prefabricated, includes adjustment and fitting	
L8603	Injectable bulking agent, collagen implant, urinary tract, 2.5 ml syringe, includes shipping and necessary supplies	
L8604	Injectable bulking agent, dextranomer/hyaluronic acid copolymer implant, urinary tract, 1 ml syringe, includes shipping and necessary supplies	
L8606	Injectable bulking agent, collagen implant, urinary tract, 1 ml syringe, includes shipping and necessary supplies	
M0076	Prolotherapy	
no code or unlisted code recommended	Cryopreservation; reproductive tissue; ovarian or oocytes	Infertility services may be directly excluded from coverage.
no code or unlisted code recommended	Lipoprotein, direct measure, intermediate density lipoproteins (IDL) (remanant proteins)	
no code or unlisted code recommended	Endoscopic lysis of epidural adhesions with direct visualization using mechanical means (spinal endoscopic catheter system) or solution injection (normal saline) including radiologic localization and epidurography	
no code or unlisted code recommended	Dual energy x-ray absorptiometry (DEXA) body composition study, one or more sites	
no code or unlisted code recommended	Treatment(s) for incontinence, pulsed magnetic neuromodulation, per day	
no code or unlisted code recommended	Speculoscopy	
no code or unlisted code recommended	Speculoscopy with directed sampling	
no code or unlisted code recommended	Urinalysis infectious agegent detection, semi-quantitative analysis of volatile compounds	
no code or unlisted code recommended	Carbon monoxide, expired gas analysis (eg. ETCO <sub>2</sub> /hemolysis breath test)	
no code or unlisted code recommended	Catheter lavage of a mammary duct(s) for collection of cytology specimen(s), in high risk individuals (GAIL risk scoring or prior personal history of breast cancer) each breast, single duct	

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no code or unlisted code recommended	Catheter lavage of a mammary duct(s) for collection of cytology specimen(s), in high risk individuals (GAIL risk scoring or prior personal history of breast cancer) each breast, each additional duct	
no code or unlisted code recommended	Prolonged extracorporeal percutaneous transseptal ventricular assist device, greater than 24 hour period	
no code or unlisted code recommended	Electrical impedance scan of the breast, bilateral (risk assessment device for breast cancer)	
no code or unlisted code recommended	Destruction/reduction of malignant breast tumor including breast carcinoma cells in the margins, microwave phased array thermotherapy, externally applied microwave energy, interstitial placement of sensor	
no code or unlisted code recommended	Percutaneous Tibial Nerve Stimulation (PTNS)	
no code or unlisted code recommended	Vestibular Evoked Myogenic Potentials (VEMP)	
no specific code identified	Vertical Expandable Prosthetic Titanium Rib	
no specific code identified	Cytoreduction, hyperthermic intraperitoneal chemotherapy for peritoneal carcinomatosis	
no specific code identified	Percutaneous intradiscal annuoplasty, any method except electrothermal, unilateral or bilateral, including fluoroscopic guidance, single level	
no specific code identified	Percutaneous intradiscal annuoplasty, any method except electrothermal, unilateral or bilateral, including fluoroscopic guidance, one or more additional levels	
Q4100	Skin substitute, not otherwise specified	
Q4101	Skin substitute , Apligraf, per sq cm	
Q4102	Skin substitute, Oasis Wound Matrix, per sq cm	
Q4103	Skin substitute, Oasis Burn Matrix, per sq cm	
Q4104	Skin substitute, Integra Bilayer Matrix Wound Dressing (BMWD0 per sq cm	
Q4105	Skin substitute, Integra Dermal Regeneration template (DRT) per sq cm	
Q4106	Skin substitute, Dermagraft, per sq cm	
Q4107	Skin substitute, Graft jacket, per sq cm	
Q4108	Skin substitute, Integra Matrix, per sq cm	
Q4109	Skin substitute, Tissuemend, per sq cm	
Q4110	Skin substitute, Primatrix, per sq cm	
Q4111	Skin substitute, Gammagraft, per sq cm	
Q4112	Allograft, Cymetra, injectible, 1cc	
Q4113	Allograft, Graftjacket Express, injectible, 1cc	
Q4114	Integra flowable wound matrix, injectible, 1cc	
Q4115	Skin substitute, alloskin, per square inch	
Q4116	Skin substitute, alloderm, per square cm	
S2107	Adoptive immunotherapy - tumor infiltration lymphocytes (TIL), lymphokine-activated killer therapy 9LAK), autolympocyte therapy (ALT)	
S2112	Arthroscopy, knee, for surgical harvesting of cartilage (chondrocyte cells)	
S2117	Arthroereisis, subtalar	
S2344	Nasal/sinus endoscopy, surgical; with enlargement of opening with inflatable device (balloon sinuplasty)	
S2348	Decompression procedure, percutaneous, of nucleus pulposus of intervertebral disc, using radiofrequency energy, single or multiple levels, lumbar	
S2360	percutaneous vertebroplasty, one vertebral body, unilateral or bilateral, cervical	
S2361	each additional cervical vertebral body	

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S2400	Repair, congenital diaphragmatic hernia in the fetus using temporary tracheal occlusion, procedure performed in utero	
S2404	Repair, myelomeningocele in the fetus, procedure performed in utero	
S2405	Repair of sacrococcygeal teratoma in the fetus, procedure performed in utero	
S2409	Repair, congenital malformation of the fetus, procedure performed in utero, not otherwise classified	
S2900	Surgical technique requiring use of robotic surgical system	
S3650	Saliva test, hormone level, during menopause	
S3652	Saliva test, hormone level, to assess preterm labor	
S3711	Circulating tumor cell test	
S3900	surface electromyography (EMG)	
S8035	Magnetic Source Imaging (MSI) somatosensory testing	
S8075	Computer Aided Detection (CAD) with full field digital mammography	
S8080	Scintimamography (radioimmunosintigraphy of the breast) unilateral, including radiopharmaceutical	
S8190	Electronic spirometer (or microspirometer)	
S8940	Equestrian/Hippotherapy	
S8948	Application of modality requiring constant provider attendance, to one or more areas; low level laser; each 15 minutes	
S9001	Home uterine monitor with or without associated nursing services	
S9024	Paranasal sinus ultrasound	
S9055	Autologous Blood devived or Platelet derived Growth Factors (gel) for wound healing	
S9056	Coma Stimulation Program	