

Procedure Code	Procedure code description	CMS quantity
19030	INJECTION PROCEDURE ONLY FOR MAMMARY DUC	1
19120	REMOVAL OF BREAST LESION	1
21240	ARTHROPLASTY, TEMPOROMANDIBULAR JOINT, W	1
21242	ARTHROPLASTY, TEMPOROMANDIBULAR JOINT, W	1
21243	ARTHROPLASTY, TEMPOROMANDIBULAR JOINT, W	1
21280	MEDIAL CANTHOPEXY (SEPARATE PROCEDURE)	1
21282	LATERAL CANTHOPEXY	1
21480	CLOSED TREATMENT OF TEMPOROMANDIBULAR DI	1
23040	ARTHROTOMY, GLENOHUMERAL JOINT, FOR INFE	1
23125	CLAVICULECTOMY; TOTAL	1
23350	INJECTION PROCEDURE FOR SHOULDER ARTHROG	1
23410	REPAIR ROTATOR CUFF ACUTE	1
23420	RECONSTRUCTION OF COMPLETE SHOULDER (ROT	1
23430	TENODESIS OF LONG TENDON OF BICEPS	1
23440	RESECTION OR TRANSPLANTATION OF LONG TEN	1
23450	CAPSULORRHAPHY, ANTERIOR; PUTTI-PLATT PR	1
23455	CAPSULORRHAPHY, ANTERIOR; BANKART TYPE O	1
23460	CAPSULORRHAPHY, ANTERIOR, ANY TYPE; WITH	1
23465	CAPSULORRHAPHY FOR RECURRENT DISLOCATION	1
23470	ARTHROPLASTY WITH PROXIMAL HUMERAL IMPLA	1
23480	OSTEOTOMY, CLAVICLE, WITH OR WITHOUT INT	1
23500	CLOSED TREATMENT OF CLAVICULAR FRACTURE;	1
23505	CLOSED TREATMENT OF CLAVICULAR FRACTURE;	1
23515	TREAT CLAVICLE FRACTURE	1
23520	CLOSED TREATMENT OF STERNOCLAVICULAR DIS	1
23525	CLOSED TREATMENT OF STERNOCLAVICULAR DIS	1
23530	OPEN TREATMENT OF STERNOCLAVICULAR DISLO	1
23540	CLOSED TREATMENT OF ACROMIOCLAVICULAR DI	1
23545	CLOSED TREATMENT OF ACROMIOCLAVICULAR DI	1
23550	OPEN TREATMENT OF ACROMIOCLAVICULAR DISL	1
23570	CLOSED TREATMENT OF SCAPULAR FRACTURE; W	1
23585	TREAT SCAPULA FRACTURE	1
23600	CLOSED TREATMENT OF PROXIMAL HUMERAL (SU	1
23605	CLOSED TREATMENT OF PROXIMAL HUMERAL (SU	1
23615	TREAT HUMERUS FRACTURE	1
23650	CLOSED TREATMENT OF SHOULDER DISLOCATION	1
23655	CLOSED TREATMENT OF SHOULDER DISLOCATION	1
23660	OPEN TREATMENT OF ACUTE SHOULDER DISLOCA	1
23670	TREAT DISLOCATION/FRACTURE	1
23700	MANIPULATION UNDER ANESTHESIA, SHOULDER	1
23800	ARTHRODESIS, GLENOHUMERAL JOINT;/ARTHROD	1
24000	ARTHROTOMY, ELBOW, FOR INFECTION, WITH E	1
24100	ARTHROTOMY, ELBOW; WITH SYNOVIAL BIOPSY	1
24102	ARTHROTOMY, ELBOW; WITH SYNOVECTOMY	1
24105	EXCISION, OLECRANON BURSA	1

Procedure Code	Procedure code description	CMS quantity
24115	EXCISION OR CURETTAGE OF BONE CYST OR BE	1
24120	EXCISION OR CURETTAGE OF BONE CYST OR BE	1
24130	EXCISION, RADIAL HEAD	1
24140	PARTIAL EXCISION (CRATERIZATION, SAUCERI	1
24147	PARTIAL EXCISION (CRATERIZATION, SAUCERI	1
24220	INJECTION PROCEDURE FOR ELBOW ARTHROGRAP	1
24330	FLEXOR-PLASTY, ELBOW (EG, STEINDLER TYPE	1
24340	TENODESIS OF BICEPS TENDON AT ELBOW (SEP	1
24360	ARTHROPLASTY, ELBOW; WITH MEMBRANE/ARTHRO	1
24362	ARTHROPLASTY, ELBOW; WITH IMPLANT AND FA	1
24400	OSTEOTOMY, HUMERUS, WITH OR WITHOUT INTE	1
24410	MULTIPLE OSTEOTOMIES WITH REALIGNMENT ON	1
24420	OSTEOPLASTY, HUMERUS (EG, SHORTENING OR	1
24435	REPAIR OF NONUNION OR MALUNION, HUMERUS;	1
24500	CLOSED TREATMENT OF HUMERAL SHAFT FRACTU	1
24505	CLOSED TREATMENT OF HUMERAL SHAFT FRACTU	1
24515	OPEN TREATMENT OF HUMERAL SHAFT FRACTURE	1
24530	CLOSED TREATMENT OF SUPRACONDYLAR OR TRA	1
24535	CLOSED TREATMENT OF SUPRACONDYLAR OR TRA	1
24545	TREAT HUMERUS FRACTURE	1
24560	CLOSED TREATMENT OF HUMERAL EPICONDYLAR	1
24565	CLOSED TREATMENT OF HUMERAL EPICONDYLAR	1
24575	TREAT HUMERUS FRACTURE	1
24576	CLOSED TREATMENT OF HUMERAL CONDYLAR FRA	1
24577	CLOSED TREATMENT OF HUMERAL CONDYLAR FRA	1
24579	TREAT HUMERUS FRACTURE	1
24600	TREATMENT OF CLOSED ELBOW DISLOCATION; W	1
24605	TREATMENT OF CLOSED ELBOW DISLOCATION; R	1
24615	OPEN TREATMENT OF ACUTE OR CHRONIC ELBOW	1
24620	CLOSED TREATMENT OF MONTEGGIA TYPE OF FR	1
24635	TREAT ELBOW FRACTURE	1
24640	CLOSED TREATMENT OF RADIAL HEAD SUBLUXAT	1
24650	CLOSED TREATMENT OF RADIAL HEAD OR NECK	1
24655	CLOSED TREATMENT OF RADIAL HEAD OR NECK	1
24665	TREAT RADIUS FRACTURE	1
24670	TREAT ULNAR FRACTURE	1
24685	TREAT ULNAR FRACTURE	1
24800	ARTHRODESIS, ELBOW JOINT; LOCAL/ARTHRODE	1
24900	AMPUTATION, ARM THROUGH HUMERUS; WITH PR	1
24920	AMPUTATION, ARM THROUGH HUMERUS; OPEN, C	1
24925	AMPUTATION, ARM THROUGH HUMERUS; SECONDA	1
24930	AMPUTATION, ARM THROUGH HUMERUS; RE-AMPU	1
24940	CINEPLASTY, UPPER EXTREMITY, COMPLETE PR	1
25000	INCISION, EXTENSOR TENDON SHEATH, WRIST	1
25040	ARTHROTOMY, RADIOCARPAL OR MIDCARPAL JOI	1

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25100	ARTHROTOMY, WRIST JOINT; WITH BIOPSY	1
25101	ARTHROTOMY, WRIST JOINT; WITH JOINT EXPL	1
25105	ARTHROTOMY, WRIST JOINT; WITH SYNOVECTOM	1
25111	EXCISION OF GANGLION, WRIST (DORSAL OR V	1
25112	EXCISION OF GANGLION, WRIST (DORSAL OR V	1
25115	RADICAL EXCISION OF BURSA, SYNOVIA OF WR	1
25116	RADICAL EXCISION OF BURSA, SYNOVIA OF WR	1
25120	EXCISION OR CURETTAGE OF BONE CYST OR BE	1
25130	EXCISION OR CURETTAGE OF BONE CYST OR BE	1
25135	EXCISION OR CURETTAGE OF BONE CYST OR BE	1
25246	INJECTION PROCEDURE FOR WRIST ARTHROGRAP	1
25350	OSTEOTOMY, RADIUS; DISTAL THIRD	1
25355	OSTEOTOMY, RADIUS; MIDDLE OR PROXIMAL TH	1
25360	OSTEOTOMY; ULNA	1
25370	MULTIPLE OSTEOTOMIES, WITH REALIGNMENT O	1
25390	OSTEOPLASTY, RADIUS OR ULNA; SHORTENING	1
25391	OSTEOPLASTY, RADIUS OR ULNA; LENGTHENING	1
25393	OSTEOPLASTY, RADIUS AND ULNA; LENGTHENIN	1
25405	REPAIR OF NONUNION OR MALUNION, RADIUS O	1
25440	REPAIR OF NONUNION, SCAPHOID CARPAL (NAV	1
25445	ARTHROPLASTY WITH PROSTHETIC REPLACEMENT	1
25450	EPIPHYSEAL ARREST BY EPIPHYSIODESIS OR S	1
25500	CLOSED TREATMENT OF RADIAL SHAFT FRACTUR	1
25505	CLOSED TREATMENT OF RADIAL SHAFT FRACTUR	1
25515	TREAT FRACTURE OF RADIUS	1
25530	CLOSED TREATMENT OF ULNAR SHAFT FRACTURE	1
25535	CLOSED TREATMENT OF ULNAR SHAFT FRACTURE	1
25545	TREAT FRACTURE OF ULNA	1
25560	CLOSED TREATMENT OF RADIAL AND ULNAR SHA	1
25565	CLOSED TREATMENT OF RADIAL AND ULNAR SHA	1
25575	TREAT FRACTURE RADIUS/ULNA	1
25600	CLOSED TREATMENT OF DISTAL RADIAL FRACTU	1
25605	CLOSED TREATMENT OF DISTAL RADIAL FRACTU	1
25630	CLOSED TREATMENT OF CARPAL BONE FRACTURE	1
25635	CLOSED TREATMENT OF CARPAL BONE FRACTURE	1
25695	OPEN TREATMENT OF LUNATE DISLOCATION	1
25800	ARTHRODESIS, WRIST JOINT (INCLUDING RADI	1
25900	AMPUTATION, FOREARM, THROUGH RADIUS AND	1
25905	AMPUTATION, FOREARM, THROUGH RADIUS AND	1
25907	AMPUTATION, FOREARM, THROUGH RADIUS AND	1
25909	AMPUTATION, FOREARM, THROUGH RADIUS AND	1
25920	DISARTICULATION THROUGH WRIST;	1
25927	TRANSMETACARPAL AMPUTATION;	1
25931	TRANSMETACARPAL AMPUTATION; RE-AMPUTATIO	1
26040	FASCIOTOMY, PALMAR (EG, DUPUYTREN'S CONT	1

Procedure Code	Procedure code description	CMS quantity
26045	FASCIOTOMY, PALMAR (EG, DUPUYTREN'S CONT	1
27005	TENOTOMY, HIP FLEXOR(S), OPEN (SEPARATE	1
27030	ARTHROTOMY, HIP, FOR INFECTION, WITH DRA	1
27033	ARTHROTOMY, HIP, INCLUDING EXPLORATION O	1
27052	ARTHROTOMY, WITH BIOPSY; HIP JOINT	1
27054	ARTHROTOMY WITH SYNOVECTOMY, HIP JOINT	1
27062	EXCISION; TROCHANTERIC BURSA OR CALCIFIC	1
27066	REMOVE HIP BONE LES DEEP	1
27071	PART REMOVAL HIP BONE DEEP	1
27090	REMOVAL OF HIP PROSTHESIS; (SEPARATE PRO	1
27120	ACETABULOPLASTY; (EG, WHITMAN, COLONNA,	1
27122	ACETABULOPLASTY; RESECTION FEMORAL HEAD	1
27125	HEMIARTHROPLASTY, HIP, PARTIAL (EG, FEMO	1
27130	ARTHROPLASTY, ACETABULAR AND PROXIMAL FE	1
27132	CONVERSION OF PREVIOUS HIP SURGERY TO TO	1
27134	REVISION OF TOTAL HIP ARTHROPLASTY; BOTH	1
27146	OSTEOTOMY, ILIAC, ACETABULAR OR INNOMINA	1
27161	OSTEOTOMY, FEMORAL NECK (SEPARATE PROCED	1
27165	OSTEOTOMY, INTERTROCHANTERIC OR SUBTROCH	1
27170	BONE GRAFT, FEMORAL HEAD, NECK, INTERTRO	1
27175	TREATMENT OF SLIPPED FEMORAL EPIPHYSIS;	1
27176	TREATMENT OF SLIPPED FEMORAL EPIPHYSIS;	1
27177	OPEN TREATMENT OF SLIPPED FEMORAL EPIPHY	1
27178	OPEN TREATMENT OF SLIPPED FEMORAL EPIPHY	1
27181	OPEN TREATMENT OF SLIPPED FEMORAL EPIPHY	1
27185	EPIPHYSEAL ARREST BY EPIPHYSIODESIS OR S	1
27220	CLOSED TREATMENT OF ACETABULUM (HIP SOCK	1
27222	CLOSED TREATMENT OF ACETABULUM (HIP SOCK	1
27230	CLOSED TREATMENT OF FEMORAL FRACTURE, PR	1
27232	CLOSED TREATMENT OF FEMORAL FRACTURE, PR	1
27235	PERCUTANEOUS SKELETAL FIXATION OF FEMORA	1
27236	OPEN TREATMENT OF FEMORAL FRACTURE, PROX	1
27238	CLOSED TREATMENT OF INTERTROCHANTERIC, P	1
27240	CLOSED TREATMENT OF INTERTROCHANTERIC, P	1
27244	OPEN TREATMENT OF INTERTROCHANTERIC, PER	1
27250	CLOSED TREATMENT OF HIP DISLOCATION, TRA	1
27252	CLOSED TREATMENT OF HIP DISLOCATION, TRA	1
27253	OPEN TREATMENT OF HIP DISLOCATION, TRAUM	1
27256	TREATMENT OF SPONTANEOUS HIP DISLOCATION	1
27257	TREATMENT OF SPONTANEOUS HIP DISLOCATION	1
27258	OPEN TREATMENT OF SPONTANEOUS HIP DISLOC	1
27305	FASCIOTOMY, ILIOTIBIAL (TENOTOMY), OPEN	1
27307	TENOTOMY, PERCUTANEOUS, ADDUCTOR OR HAMS	1
27310	ARTHROTOMY, KNEE, FOR INFECTION, WITH EX	1
27330	BIOPSY KNEE JOINT LINING	1

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27332	ARTHROTOMY, KNEE, WITH EXCISION OF SEMIL	1
27333	ARTHROTOMY, KNEE, WITH EXCISION OF SEMIL	1
27335	ARTHROTOMY, KNEE, WITH SYNOVECTOMY; ANTE	1
27340	EXCISION, PREPATELLAR BURSA	1
27345	EXCISION OF SYNOVIAL CYST OF POPLITEAL S	1
27350	PATELLECTOMY OR HEMIPATELLECTOMY	1
27355	EXCISION OR CURETTAGE OF BONE CYST OR BE	1
27357	EXCISION OR CURETTAGE OF BONE CYST OR BE	1
27360	PARTIAL REMOVAL LEG BONE(S)	2
27365	RESECT FEMUR/KNEE TUMOR	1
27370	INJECTION PROCEDURE FOR KNEE ARTHROGRAPH	1
27409	REPAIR, PRIMARY, TORN LIGAMENT AND/OR CA	1
27420	RECONSTRUCTION FOR RECURRENT DISLOCATING	1
27422	RECONSTRUCTION FOR RECURRENT DISLOCATING	1
27424	RECONSTRUCTION FOR RECURRENT DISLOCATING	1
27425	LATERAL RETINACULAR RELEASE (ANY METHOD)	1
27435	CAPSULOTOMY, KNEE, POSTERIOR CAPSULAR RE	1
27445	ARTHROPLASTY, KNEE, CONSTRAINED PROSTHES	1
27447	ARTHROPLASTY, KNEE, CONDYLE AND PLATEAU;	1
27454	OSTEOTOMY, MULTIPLE, FEMORAL SHAFT, WITH	1
27465	OSTEOPLASTY, FEMUR; SHORTENING (EXCLUDIN	1
27466	OSTEOPLASTY, FEMUR; LENGTHENING	1
27472	REPAIR, NONUNION OR MALUNION, FEMUR, DIS	1
27475	ARREST, EPIPHYSEAL, ANY METHOD (EG, EPIP	1
27477	ARREST, EPIPHYSEAL, ANY METHOD (EG, EPIP	1
27479	ARREST, EPIPHYSEAL, ANY METHOD (EG, EPIP	1
27485	ARREST, HEMIEPIPHYSEAL, DISTAL FEMUR OR	1
27500	CLOSED TREATMENT OF FEMORAL SHAFT FRACTU	1
27502	CLOSED TREATMENT OF FEMORAL SHAFT FRACTU	1
27506	OPEN TREATMENT OF FEMORAL SHAFT FRACTURE	1
27508	CLOSED TREATMENT OF FEMORAL FRACTURE, DI	1
27510	CLOSED TREATMENT OF FEMORAL FRACTURE, DI	1
27514	TREATMENT OF THIGH FRACTURE	1
27520	CLOSED TREATMENT OF PATELLAR FRACTURE, W	1
27524	OPEN TREATMENT OF PATELLAR FRACTURE, WIT	1
27530	CLOSED TREATMENT OF TIBIAL FRACTURE, PRO	1
27532	CLOSED TREATMENT OF TIBIAL FRACTURE, PRO	1
27536	OPEN TREATMENT OF TIBIAL FRACTURE, PROXI	1
27550	CLOSED TREATMENT OF KNEE DISLOCATION; WI	1
27552	CLOSED TREATMENT OF KNEE DISLOCATION; RE	1
27556	TREAT KNEE DISLOCATION	1
27560	CLOSED TREATMENT OF PATELLAR DISLOCATION	1
27562	CLOSED TREATMENT OF PATELLAR DISLOCATION	1
27566	OPEN TREATMENT OF PATELLAR DISLOCATION,	1
27580	ARTHRODESIS, KNEE, ANY TECHNIQUE/FUSION	1

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27590	AMPUTATION, THIGH, THROUGH FEMUR, ANY LE	1
27592	AMPUTATION, THIGH, THROUGH FEMUR, ANY LE	1
27594	AMPUTATION, THIGH, THROUGH FEMUR, ANY LE	1
27596	AMPUTATION, THIGH, THROUGH FEMUR, ANY LE	1
27598	DISARTICULATION AT KNEE	1
27600	DECOMPRESSION FASCIOTOMY, LEG; ANTERIOR	1
27602	DECOMPRESSION FASCIOTOMY, LEG; ANTERIOR	1
27610	ARTHROTOMY, ANKLE, FOR INFECTION, WITH E	1
27612	ARTHROTOMY, ANKLE, POSTERIOR CAPSULAR RE	1
27620	ARTHROTOMY, ANKLE, WITH JOINT EXPLORATIO	1
27625	ARTHROTOMY, ANKLE, WITH SYNOVECTOMY;/ART	1
27635	EXCISION OR CURETTAGE OF BONE CYST OR BE	1
27637	EXCISION OR CURETTAGE OF BONE CYST OR BE	1
27640	PARTIAL REMOVAL OF TIBIA	1
27641	PARTIAL REMOVAL OF FIBULA	1
27648	INJECTION PROCEDURE FOR ANKLE ARTHROGRAP	1
27650	REPAIR, PRIMARY, OPEN OR PERCUTANEOUS, R	1
27695	REPAIR, PRIMARY, DISRUPTED LIGAMENT, ANK	1
27696	REPAIR, PRIMARY, DISRUPTED LIGAMENT, ANK	1
27700	ARTHROPLASTY, ANKLE;	1
27705	OSTEOTOMY; TIBIA	1
27707	OSTEOTOMY; FIBULA	1
27712	OSTEOTOMY; MULTIPLE, WITH REALIGNMENT ON	1
27715	OSTEOPLASTY, TIBIA AND FIBULA, LENGTHENI	1
27724	REPAIR OF NONUNION OR MALUNION, TIBIA; W	1
27734	ARREST, EPIPHYSEAL (EPIPHYSIODESIS), OPE	1
27740	ARREST, EPIPHYSEAL (EPIPHYSIODESIS), ANY	1
27742	ARREST, EPIPHYSEAL (EPIPHYSIODESIS), ANY	1
27750	CLOSED TREATMENT OF TIBIAL SHAFT FRACTUR	1
27752	CLOSED TREATMENT OF TIBIAL SHAFT FRACTUR	1
27756	PERCUTANEOUS SKELETAL FIXATION OF TIBIAL	1
27760	CLTX MEDIAL ANKLE FX	1
27762	CLTX MED ANKLE FX W/MNPJ	1
27766	OPTX MEDIAL ANKLE FX	1
27767	CLTX POST ANKLE FX	1
27768	CLTX POST ANKLE FX W/MNPJ	1
27769	OPTX POST ANKLE FX	1
27780	CLOSED TREATMENT OF PROXIMAL FIBULA OR S	1
27784	TREATMENT OF FIBULA FRACTURE	1
27786	CLOSED TREATMENT OF DISTAL FIBULAR FRACT	1
27788	CLOSED TREATMENT OF DISTAL FIBULAR FRACT	1
27792	TREATMENT OF ANKLE FRACTURE	1
27808	TREATMENT OF ANKLE FRACTURE	1
27810	TREATMENT OF ANKLE FRACTURE	1
27814	TREATMENT OF ANKLE FRACTURE	1

Procedure Code	Procedure code description	CMS quantity
27816	CLOSED TREATMENT OF TRIMALLEOLAR ANKLE F	1
27818	CLOSED TREATMENT OF TRIMALLEOLAR ANKLE F	1
27822	TREATMENT OF ANKLE FRACTURE	1
27840	CLOSED TREATMENT OF ANKLE DISLOCATION; W	1
27842	CLOSED TREATMENT OF ANKLE DISLOCATION; R	1
27846	OPEN TREATMENT OF ANKLE DISLOCATION, WIT	1
27848	OPEN TREATMENT OF ANKLE DISLOCATION, WIT	1
27870	FUSION OF ANKLE JOINT OPEN	1
27880	AMPUTATION, LEG, THROUGH TIBIA AND FIBUL	1
27882	AMPUTATION, LEG, THROUGH TIBIA AND FIBUL	1
27884	AMPUTATION, LEG, THROUGH TIBIA AND FIBUL	1
27886	AMPUTATION, LEG, THROUGH TIBIA AND FIBUL	1
27888	AMPUTATION, ANKLE, THROUGH MALLEOLI OF T	1
28060	PARTIAL REMOVAL FOOT FASCIA	1
28111	OSTECTOMY, COMPLETE EXCISION; FIRST META	1
28130	TALECTOMY (ASTRAGALECTOMY)	1
28260	CAPSULOTOMY, MIDFOOT; MEDIAL RELEASE ONL	1
28290	CORRECTION, HALLUX VALGUS (BUNION), WITH	1
28292	CORRECTION, HALLUX VALGUS (BUNION), WITH	1
28293	CORRECTION, HALLUX VALGUS (BUNION), WITH	1
28294	CORRECTION, HALLUX VALGUS (BUNION), WITH	1
28296	CORRECTION, HALLUX VALGUS (BUNION), WITH	1
28304	OSTEOTOMY, MIDTARSAL BONES, OTHER THAN C	1
28306	OSTEOTOMY, METATARSAL, BASE OR SHAFT, SI	1
28315	SESAMOIDECTOMY, FIRST TOE (SEPARATE PROC	1
28400	CLOSED TREATMENT OF CALCANEAL FRACTURE;	1
28405	CLOSED TREATMENT OF CALCANEAL FRACTURE;	1
28406	PERCUTANEOUS SKELETAL FIXATION OF CALCAN	1
28415	TREAT HEEL FRACTURE	1
28430	CLOSED TREATMENT OF TALUS FRACTURE; WITH	1
28435	CLOSED TREATMENT OF TALUS FRACTURE; WITH	1
28445	TREAT ANKLE FRACTURE	1
28446	OSTEOCHONDRAL TALUS AUTOGRFT	1
28750	ARTHRODESIS, GREAT TOE; METATARSOPHALANG	1
28755	ARTHRODESIS, GREAT TOE; INTERPHALANGEAL	1
28800	AMPUTATION, FOOT; MIDTARSAL (CHOPART TYP	1
28805	AMPUTATION, FOOT; TRANSMETATARSAL	1
29065	APPLICATION, CAST; SHOULDER TO HAND (LON	1
29075	APPLICATION, CAST; ELBOW TO FINGER (SHOR	1
29085	APPLICATION, CAST; HAND AND LOWER FOREAR	1
29105	APPLICATION OF LONG ARM SPLINT (SHOULDER	1
29125	APPLICATION OF SHORT ARM SPLINT (FOREARM	1
29345	APPLICATION OF LONG LEG CAST (THIGH TO T	1
29358	APPLICATION OF LONG LEG CAST BRACE	1
29405	APPLICATION OF SHORT LEG CAST (BELOW KNE	1

Procedure Code	Procedure code description	CMS quantity
29425	APPLICATION OF SHORT LEG CAST (BELOW KNEE	1
29505	APPLICATION LONG LEG SPLINT	1
29515	APPLICATION OF SHORT LEG SPLINT (CALF TO	1
29580	STRAPPING; UNNA BOOT	1
29581	APPLY MULTLAY COMPRS LWR LEG	1
29705	REMOVAL OR BIVALVING; FULL ARM OR FULL L	1
29710	REMOVAL OR BIVALVING; SHOULDER OR HIP SP	1
29870	KNEE ARTHROSCOPY DX	1
29871	ARTHROSCOPY, KNEE, SURGICAL; FOR INFECTI	1
29873	ARTHROSCOPY, KNEE, SURGICAL; WITH LATERA	1
29875	ARTHROSCOPY, KNEE, SURGICAL; SYNOVECTOMY	1
29877	ARTHROSCOPY, KNEE, SURGICAL; DEBRIDEMENT	1
29881	KNEE ARTHROSCOPY/SURGERY	1
30140	SUBMUCOUS RESECTION INFERIOR TURBINATE,	1
31050	EXPLORATION SPHENOID SINUS	1
31070	SINUSOTOMY FRONTAL; EXTERNAL, SIMPLE (TR	1
31075	SINUSOTOMY FRONTAL; TRANSORBITAL, UNILAT	1
31080	SINUSOTOMY FRONTAL; OBLITERATIVE WITHOUT	1
31225	MAXILLECTOMY; WITHOUT ORBITAL EXENTERATI	1
31237	NASAL/SINUS ENDOSCOPY SURG	1
31254	NASAL/SINUS ENDOSCOPY, SURGICAL; WITH ET	1
31256	NASAL/SINUS ENDOSCOPY, SURGICAL, WITH MA	1
35351	THROMBOENDARTERECTOMY, WITH OR WITHOUT P	1
35371	THROMBOENDARTERECTOMY, WITH OR WITHOUT P	1
37609	LIGATION OR BIOPSY, TEMPORAL ARTERY	1
37761	LIGATE LEG VEINS OPEN	1
37765	STAB PHLEB VEINS XTR 10-20	1
37766	PHLEB VEINS - EXTREM 20+	1
38900	IO MAP OF SENT LYMPH NODE	1
50392	INTRODUCTION OF INTRACATHETER OR CATHETE	1
64425	N BLOCK INJ ILIO-ING/HYPOGI	1
64430	N BLOCK INJ PUDENDAL	1
65091	EVISCERATION OF OCULAR CONTENTS; WITHOUT	1
65093	EVISCERATION OF OCULAR CONTENTS; WITH IM	1
65101	ENUCLEATION OF EYE; WITHOUT IMPLANT	1
65103	ENUCLEATION OF EYE; WITH IMPLANT, MUSCLE	1
65105	ENUCLEATION OF EYE; WITH IMPLANT, MUSCLE	1
65110	EXENTERATION OF ORBIT (DOES NOT INCLUDE	1
65112	EXENTERATION OF ORBIT (DOES NOT INCLUDE	1
65114	EXENTERATION OF ORBIT (DOES NOT INCLUDE	1
65125	MODIFICATION OF OCULAR IMPLANT WITH PLAC	1
65130	INSERTION OF OCULAR IMPLANT SECONDARY; A	1
65135	INSERTION OF OCULAR IMPLANT SECONDARY; A	1
65140	INSERTION OF OCULAR IMPLANT SECONDARY; A	1
65155	REINSERTION OF OCULAR IMPLANT; WITH USE	1

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65175	REMOVAL OF OCULAR IMPLANT	1
65205	REMOVAL OF FOREIGN BODY, EXTERNAL EYE; C	1
65210	REMOVAL OF FOREIGN BODY, EXTERNAL EYE; C	1
65220	REMOVAL OF FOREIGN BODY, EXTERNAL EYE; C	1
65222	REMOVAL OF FOREIGN BODY, EXTERNAL EYE; C	1
65235	REMOVAL OF FOREIGN BODY, INTRAOCULAR; FR	1
65260	REMOVAL OF FOREIGN BODY, INTRAOCULAR; FR	1
65265	REMOVAL OF FOREIGN BODY, INTRAOCULAR; FR	1
65270	REPAIR OF LACERATION; CONJUNCTIVA, WITH	1
65272	REPAIR OF LACERATION; CONJUNCTIVA, BY MO	1
65273	REPAIR OF LACERATION; CONJUNCTIVA, BY MO	1
65275	REPAIR OF LACERATION; CORNEA, NONPERFORA	1
65280	REPAIR OF LACERATION; CORNEA AND/OR SCLE	1
65285	REPAIR OF LACERATION; CORNEA AND/OR SCLE	1
65286	REPAIR OF LACERATION; APPLICATION OF TIS	1
65290	REPAIR OF WOUND, EXTRAOCULAR MUSCLE, TEN	1
65400	EXCISION OF LESION, CORNEA (KERATECTOMY,	1
65410	BIOPSY OF CORNEA	1
65420	EXCISION OR TRANSPOSITION OF PTERYGIUM;	1
65426	EXCISION OR TRANSPOSITION OF PTERYGIUM;	1
65430	SCRAPING OF CORNEA, DIAGNOSTIC, FOR SMEA	1
65435	REMOVAL OF CORNEAL EPITHELIUM; WITH OR W	1
65436	REMOVAL OF CORNEAL EPITHELIUM; WITH APPL	1
65450	DESTRUCTION OF LESION OF CORNEA BY CRYOT	1
65600	MULTIPLE PUNCTURES OF ANTERIOR CORNEA (E	1
65710	CORNEAL TRANSPLANT	1
65730	CORNEAL TRANSPLANT	1
65750	KERATOPLASTY (CORNEAL TRANSPLANT); PENET	1
65755	KERATOPLASTY (CORNEAL TRANSPLANT); PENET	1
65756	CORNEAL TRNSPL ENDOTHELIAL	1
65770	KERATOPROSTHESIS	1
65772	CORNEAL RELAXING INCISION FOR CORRECTION	1
65775	CORNEAL WEDGE RESECTION FOR CORRECTION O	1
65800	PARACENTESIS OF ANTERIOR CHAMBER OF EYE	1
65805	PARACENTESIS OF ANTERIOR CHAMBER OF EYE	1
65810	PARACENTESIS OF ANTERIOR CHAMBER OF EYE	1
65815	PARACENTESIS OF ANTERIOR CHAMBER OF EYE	1
65820	GONIOTOMY	1
65850	TRABECULOTOMY AB EXTERNO	1
65855	TRABECULOPLASTY BY LASER SURGERY, ONE OR	1
65860	SEVERING ADHESIONS OF ANTERIOR SEGMENT,	1
65865	SEVERING ADHESIONS OF ANTERIOR SEGMENT O	1
65870	ANTERIOR SYNECHIAE, EXCEPT GONIOSYNECHIA	1
65875	ANTERIOR SYNECHIAE, EXCEPT GONIOSYNECHIA	1
65880	ANTERIOR SYNECHIAE, EXCEPT GONIOSYNECHIA	1

Procedure Code	Procedure code description	CMS quantity
65900	REMOVAL OF EPITHELIAL DOWNGROWTH, ANTERI	1
65920	REMOVAL OF IMPLANTED MATERIAL, ANTERIOR	1
65930	REMOVAL OF BLOOD CLOT, ANTERIOR SEGMENT	1
66020	INJECTION, ANTERIOR CHAMBER OF EYE (SEPA	1
66030	INJECTION, ANTERIOR CHAMBER (SEPARATE PR	1
66130	EXCISION OF LESION, SCLERA	1
66150	FISTULIZATION OF SCLERA FOR GLAUCOMA; TR	1
66155	FISTULIZATION OF SCLERA FOR GLAUCOMA; TH	1
66160	FISTULIZATION OF SCLERA FOR GLAUCOMA; SC	1
66165	FISTULIZATION OF SCLERA FOR GLAUCOMA; IR	1
66170	FISTULIZATION OF SCLERA FOR GLAUCOMA; TR	1
66172	FISTULIZATION OF SCLERA FOR GLAUCOMA; TR	1
66180	AQUEOUS SHUNT TO EXTRAOCULAR RESERVOIR (1
66185	REVISION OF AQUEOUS SHUNT TO EXTRAOCULAR	1
66220	REPAIR OF SCLERAL STAPHYLOMA; WITHOUT GR	1
66225	REPAIR OF SCLERAL STAPHYLOMA; WITH GRAFT	1
66250	REVISION OR REPAIR OF OPERATIVE WOUND OF	1
66500	IRIDOTOMY BY STAB INCISION (SEPARATE PRO	1
66505	IRIDOTOMY BY STAB INCISION (SEPARATE PRO	1
66600	IRIDECTOMY, WITH CORNEOSCLERAL OR CORNEA	1
66605	IRIDECTOMY, WITH CORNEOSCLERAL OR CORNEA	1
66625	IRIDECTOMY, WITH CORNEOSCLERAL OR CORNEA	1
66630	IRIDECTOMY, WITH CORNEOSCLERAL OR CORNEA	1
66635	IRIDECTOMY, WITH CORNEOSCLERAL OR CORNEA	1
66680	REPAIR OF IRIS, CILIARY BODY (AS FOR IRI	1
66682	SUTURE OF IRIS, CILIARY BODY (SEPARATE P	1
66700	DESTRUCTION CILIARY BODY	1
66710	CILIARY BODY DESTRUCTION; CYCLOPHOTOCOAG	1
66720	DESTRUCTION CILIARY BODY	1
66740	DESTRUCTION CILIARY BODY	1
66761	REVISION OF IRIS	1
66762	IRIDOPLASTY BY PHOTOCOAGULATION (ONE OR	1
66770	DESTRUCTION OF CYST OR LESION IRIS OR CI	1
66820	INCISION SECONDARY CATARACT	1
66821	DISCISSION OF SECONDARY MEMBRANOUS CATAR	1
66825	REPOSITIONING OF INTRAOCULAR LENS PROSTH	1
66830	REMOVAL OF SECONDARY MEMBRANOUS CATARACT	1
66840	REMOVAL OF LENS MATERIAL; ASPIRATION TEC	1
66850	REMOVAL OF LENS MATERIAL; PHACOFRACTURA	1
66852	REMOVAL OF LENS MATERIAL; PARS PLANA APP	1
66920	REMOVAL OF LENS MATERIAL; INTRACAPSULAR	1
66930	REMOVAL OF LENS MATERIAL; INTRACAPSULAR,	1
66940	REMOVAL OF LENS MATERIAL; EXTRACAPSULAR	1
66982	CATARACT SURGERY COMPLEX	1
66983	CATARACT SURG W/IOL 1 STAGE	1

Procedure Code	Procedure code description	CMS quantity
66984	CATARACT SURG W/IOL 1 STAGE	1
66985	INSERTION OF INTRAOCULAR LENS PROSTHESIS	1
66986	EXCHANGE OF INTRAOCULAR LENS	1
67005	REMOVAL OF VITREOUS, ANTERIOR APPROACH (1
67010	REMOVAL OF VITREOUS, ANTERIOR APPROACH (1
67015	ASPIRATION OR RELEASE OF VITREOUS, SUBRE	1
67025	INJECTION OF VITREOUS SUBSTITUTE, PARS P	1
67027	IMPLANTATION OF INTRAVITREAL DRUG DELIVE	1
67028	INTRAVITREAL INJECTION OF A PHARMACOLOGI	1
67030	DISCISSION OF VITREOUS STRANDS (WITHOUT	1
67031	LASER SURGERY EYE STRANDS	1
67036	VITRECTOMY, MECHANICAL, PARS PLANA APPRO	1
67039	VITRECTOMY, MECHANICAL, PARS PLANA APPRO	1
67040	VITRECTOMY, MECHANICAL, PARS PLANA APPRO	1
67041	VIT FOR MACULAR PUCKER	1
67042	VIT FOR MACULAR HOLE	1
67043	VIT FOR MEMBRANE DISSECT	1
67101	REPAIR OF RETINAL DETACHMENT, ONE OR MOR	1
67105	REPAIR OF RETINAL DETACHMENT, ONE OR MOR	1
67107	REPAIR OF RETINAL DETACHMENT; SCLERAL BU	1
67108	REPAIR OF RETINAL DETACHMENT; WITH VITRE	1
67110	REPAIR OF RETINAL DETACHMENT; BY INJECTI	1
67112	REPAIR OF RETINAL DETACHMENT; BY SCLERAL	1
67113	REPAIR RETINAL DETACH CPLX	1
67115	RELEASE OF ENCIRCLING MATERIAL (POSTERIO	1
67120	REMOVAL OF IMPLANTED MATERIAL, POSTERIOR	1
67121	REMOVAL OF IMPLANTED MATERIAL, POSTERIOR	1
67141	PROPHYLAXIS OF RETINAL DETACHMENT (EG, R	1
67145	PROPHYLAXIS OF RETINAL DETACHMENT (EG, R	1
67208	DESTRUCTION OF LOCALIZED LESION OF RETIN	1
67210	DESTRUCTION OF LOCALIZED LESION OF RETIN	1
67218	DESTRUCTION OF LOCALIZED LESION OF RETIN	1
67220	DESTRUCTION OF LOCALIZED LESION OF CHORO	1
67227	TREATMENT OF RETINAL LESION	1
67228	TREATMENT OF RETINAL LESION	1
67250	SCLERAL REINFORCEMENT (SEPARATE PROCEDUR	1
67255	SCLERAL REINFORCEMENT (SEPARATE PROCEDUR	1
67311	STRABISMUS SURGERY, RECESSIO OR RESECTI	1
67312	STRABISMUS SURGERY, RECESSIO OR RESECTI	1
67314	STRABISMUS SURGERY, RECESSIO OR RESECTI	1
67316	STRABISMUS SURGERY, RECESSIO OR RESECTI	1
67318	STRABISMUS SURGERY, ANY PROCEDURE (PATIE	1
67343	RELEASE OF EXTENSIVE SCAR TISSUE WITHOUT	1
67345	CHEMODENERVATION OF EXTRAOCULAR MUSCLE	1
67400	ORBITOTOMY WITHOUT BONE FLAP (FRONTAL OR	1

Procedure Code	Procedure code description	CMS quantity
67405	ORBITOTOMY WITHOUT BONE FLAP (FRONTAL OR	1
67412	ORBITOTOMY WITHOUT BONE FLAP (FRONTAL OR	1
67413	ORBITOTOMY WITHOUT BONE FLAP (FRONTAL OR	1
67414	ORBITOTOMY WITHOUT BONE FLAP (FRONTAL OR	1
67415	ASPIRATION ORBITAL CONTENTS	1
67420	ORBITOTOMY WITH BONE FLAP OR WINDOW, LAT	1
67430	ORBITOTOMY WITH BONE FLAP OR WINDOW, LAT	1
67440	ORBITOTOMY WITH BONE FLAP OR WINDOW, LAT	1
67445	ORBITOTOMY WITH BONE FLAP OR WINDOW, LAT	1
67450	ORBITOTOMY WITH BONE FLAP OR WINDOW, LAT	1
67500	RETROBULBAR INJECTION; MEDICATION (SEPAR	1
67505	RETROBULBAR INJECTION; ALCOHOL	1
67515	INJECTION OF MEDICATION OR OTHER SUBSTAN	1
67550	ORBITAL IMPLANT (IMPLANT OUTSIDE MUSCLE	1
67560	ORBITAL IMPLANT (IMPLANT OUTSIDE MUSCLE	1
67570	OPTIC NERVE DECOMPRESSION (EG, INCISION	1
67710	SEVERING OF TARSORRHAPHY	1
67715	CANTHOTOMY (SEPARATE PROCEDURE)	1
67820	CORRECTION OF TRICHIASIS; EPILATION, BY	1
67825	CORRECTION OF TRICHIASIS; EPILATION BY O	1
67835	CORRECTION OF TRICHIASIS; INCISION OF LI	1
67880	CONSTRUCTION OF INTERMARGINAL ADHESIONS,	1
67882	CONSTRUCTION OF INTERMARGINAL ADHESIONS,	1
67900	REPAIR OF BROW PTOSIS (SUPRACILIARY, MID	1
67901	REPAIR OF BLEPHAROPTOSIS; FRONTALIS MUSC	1
67902	REPAIR OF BLEPHAROPTOSIS; FRONTALIS MUSC	1
67903	REPAIR OF BLEPHAROPTOSIS; (TARSO) LEVATO	1
67904	REPAIR OF BLEPHAROPTOSIS; (TARSO) LEVATO	1
67906	REPAIR OF BLEPHAROPTOSIS; SUPERIOR RECTU	1
67908	REPAIR OF BLEPHAROPTOSIS; CONJUNCTIVO-TA	1
67909	REDUCTION OF OVERCORRECTION OF PTOSIS	1
67971	RECONSTRUCTION OF EYELID, FULL THICKNESS	1
67973	RECONSTRUCTION OF EYELID, FULL THICKNESS	1
67974	RECONSTRUCTION OF EYELID, FULL THICKNESS	1
67975	RECONSTRUCTION OF EYELID, FULL THICKNESS	1
68020	INCISION OF CONJUNCTIVA, DRAINAGE OF CYS	1
68040	EXPRESSION OF CONJUNCTIVAL FOLLICLES (EG	1
68100	BIOPSY OF CONJUNCTIVA	1
68110	EXCISION OF LESION, CONJUNCTIVA; UP TO 1	1
68115	EXCISION OF LESION, CONJUNCTIVA; OVER 1	1
68130	EXCISION OF LESION, CONJUNCTIVA; WITH AD	1
68135	DESTRUCTION OF LESION, CONJUNCTIVA	1
68200	SUBCONJUNCTIVAL INJECTION	1
68320	CONJUNCTIVOPLASTY; WITH CONJUNCTIVAL GRA	1
68325	CONJUNCTIVOPLASTY; WITH BUCCAL MUCOUS ME	1

Procedure Code	Procedure code description	CMS quantity
68326	CONJUNCTIVOPLASTY, RECONSTRUCTION CUL-DE	1
68330	REPAIR OF SYMBLEPHARON; CONJUNCTIVOPLAST	1
68335	REPAIR OF SYMBLEPHARON; WITH FREE GRAFT	1
68340	REPAIR OF SYMBLEPHARON; DIVISION OF SYMB	1
68360	CONJUNCTIVAL FLAP; BRIDGE OR PARTIAL (SE	1
68362	CONJUNCTIVAL FLAP; TOTAL (SUCH AS GUNDER	1
68400	INCISION, DRAINAGE OF LACRIMAL GLAND	1
68420	INCISION, DRAINAGE OF LACRIMAL SAC (DACR	1
68500	EXCISION OF LACRIMAL GLAND (DACRYOADENEC	1
68505	PARTIAL REMOVAL TEAR GLAND	1
68510	BIOPSY OF LACRIMAL GLAND	1
68520	EXCISION OF LACRIMAL SAC (DACRYOCYSTECTO	1
68525	BIOPSY OF LACRIMAL SAC	1
68530	REMOVAL OF FOREIGN BODY OR DACRYOLITH, L	1
68700	PLASTIC REPAIR OF CANALICULI	1
68720	DACRYOCYSTORHINOSTOMY (FISTULIZATION OF	1
68745	CONJUNCTIVORHINOSTOMY (FISTULIZATION OF	1
68750	CONJUNCTIVORHINOSTOMY (FISTULIZATION OF	1
68770	CLOSURE OF LACRIMAL FISTULA (SEPARATE PR	1
68840	PROBING OF LACRIMAL CANALICULI, WITH OR	1
68850	INJECTION OF CONTRAST MEDIUM FOR DACRYOC	1
69200	REMOVAL FOREIGN BODY FROM EXTERNAL AUDIT	1
69420	MYRINGOTOMY INCLUDING ASPIRATION AND/OR	1
69440	MIDDLE EAR EXPLORATION THROUGH POSTAURIC	1
69450	TYMPANOLYSIS, TRANSCANAL	1
69540	EXCISION AURAL POLYP	1
69610	TYMPANIC MEMBRANE REPAIR, WITH OR WITHOU	1
69620	MYRINGOPLASTY (SURGERY CONFINED TO DRUMH	1
69631	TYMPANOPLASTY WITHOUT MASTOIDECTOMY (INC	1
69700	CLOSURE POSTAURICULAR FISTULA, MASTOID (1
75898	ANGIOGRAM THROUGH EXISTING CATHETER FOR	1
96367	TX/PROPH/DG ADDL SEQ IV INF	3
96368	THER/DIAG CONCURRENT INF	1
A4604	TUBING WITH INTEGRATED HEATING ELEMENT F	1
A6501	COMPRESSION BURN GARMENT, BODYSUIT (HEAD	1
A6502	COMPRESSION BURN GARMENT, CHIN STRAP, CU	1
A6503	COMPRESSION BURN GARMENT, FACIAL HOOD, C	1
A6509	COMPRESSION BURN GARMENT, UPPER TRUNK TO	1
A6510	COMPRESSION BURN GARMENT, TRUNK, INCLUDI	1
A6511	COMPRESSION BURN GARMENT, LOWER TRUNK IN	1
A7045	EXHALATION PORT WITH OR WITHOUT SWIVEL U	1
A7503	FILTER HOLDER OR FILTER CAP, REUSABLE, F	3
A7522	TRACHEOSTOMY/LARYNGECTOMY TUBE, STAINLES	1
83876	ASSAY MYELOPEROXIDASE	2
87905	SIALIDASE ENZYME ASSAY	2