



# ENCOUNTER KEYS

November-December, 2021

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## Benefit Limits

Effective for October 1, 2021 the following benefit limits have been added to the system.

LMT	UNIT		BEGINNING	ENDING
TYP DESCRIPTION	AMT	--CONTRACT---	DATE OF	DATE OF
	IND	YEAR	SERVICE	SERVICE
DN ALTCS DENTAL AMOUNT	AMT	2022 2000.00	10/01/2021	09/30/2022
D2 NON-ALTCS DENT AMT	AMT	2022 1000.00	10/01/2021	09/30/2022
PH ALTCS THERAPY	UNT	2022 30	10/01/2021	09/30/2022
PT PHYSICAL THERAPY VI	UNT	2022 60	10/01/2021	09/30/2022
RS RESPITE CARE HOURS	UNT	2022 600	10/01/2021	09/30/2022

## Codes

- Effective for date of service July 1, 2021 the CPT code 90619 (Meningococcal Conjugate Vaccine, Serogroups A, C, W, Y, Quadrivalent, Tetanus Toxoid Carrier (Menacwy-Tt) for injection into muscle) has been added to the reference screen

## Encounter Processing Schedules

For information about current/future production and test schedules can be found on the AHCCCS website: [https://www.azahcccs.gov/PlansProviders/HealthPlans/encounters.html#Encounter\\_Processing\\_Schedules](https://www.azahcccs.gov/PlansProviders/HealthPlans/encounters.html#Encounter_Processing_Schedules)

Current Encounter Production (Updated 10/12/2021)

Future Encounter Production

**Test Schedule** For the test environment, the adjudication process begins every Thursday. Test files must be submitted by 5pm on Wednesday. Depending on the volume of test files submitted, test results are usually available anytime between Friday and Monday.



**Coverage Code**

<b>Code</b>	<b>Description</b>	<b>Coverage Code</b>	<b>Effective Begin Date</b>
91300	Severe Acute Respiratory Syndrome Coronavirus 2 (Sars-Cov-2) (Coronavirus Disease "Covid-19") Vaccine, MRNA-LNP, Spike Protein, Preservative Free, 30 mcg/0.3ml Dosage, Diluent Reconstituted, For Intramuscular Use	03 - Covered Service/Use Other Code	12/14/2020
91300	Severe Acute Respiratory Syndrome Coronavirus 2 (Sars-Cov-2) (Coronavirus Disease "Covid-19") Vaccine, MRNA-LNP, Spike Protein, Preservative Free, 30 mcg/0.3ml Dosage, Diluent Reconstituted, For Intramuscular Use	03 - Covered Service/Use Other Code	12/14/2020
91306	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV2) (coronavirus disease [COVID-19]) vaccine, MRNA-LNP, spike protein, preservative free, 50 mcg/0.25 mL dosage, for intramuscular use (Moderna)	03 - Covered Service/Use Other Code	10/1/2021
91307	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 10 mcg/0.2 mL dosage, diluent reconstituted, tris-sucrose formulation, for intramuscular use	03 - Covered Service/Use Other Code	10/29/2021
0004A	Administration Of Coronavirus Vaccine 1, Reserved	01 - Covered Service/Code Available	10/1/2021
0004A	Administration Of Coronavirus Vaccine 1, Reserved	01 - Covered Service/Code Available	10/1/2021
0064A	Administration of Coronavirus Vaccine 7, Reserved	01 - Covered Service/Code Available	10/1/2021
0071A	Administration Of Coronavirus Vaccine 8, Dose 1	01 - Covered Service/Code Available	10/29/2021
0072A	Administration Of Coronavirus Vaccine 8, Dose 2	01 - Covered Service/Code Available	10/29/2021
G0298	HIV Antigen/Antibody, Combination Assay, Screening	04 - Not Covered Service/Code Not Available	1/1/2016
Q4119	Matristem Wound Matrix, Per Square Centimeter	04 - Not Covered Service/Code Not Available	12/31/2016
Q4120	Matristem Burn Matrix, Per Square Centimeter	04 - Not Covered Service/Code Not Available	12/31/2016
Q4129	Unite Biomatrix, Per Square Centimeter	04 - Not Covered Service/Code Not Available	12/31/2016

**Lab Indicator**

The lab Indicator on the Reference Screens has been removed for the CPT code 87801 (Detection Test by Nucleic Acid for Multiple Organisms, amplified probe(s) technique).

**Modifiers**

Effective for dates of service listed the following modifiers have been added to the system.

Code	Description	Modifiers	Effective Begin Date
27216	Insertion of hardware to broken and/or dislocated bone on one side of pelvis, accessed through the skin	LT - Identifies Left Side	10/1/2020
27216	Insertion of hardware to broken and/or dislocated bone on one side of pelvis, accessed through the skin	RT - Identifies Right Side	10/1/2020
28740	Fusion Of Foot in the Midfoot Region	50 - Bilateral Procedure (Pay 50%)	5/1/2020
43277	Balloon Dilation of Pancreatic or Bile Duct or Sphincter Using a Flexible Endoscope Via Mouth	51 – Multiple Procedures	5/1/2021
50949	Urinary Duct (Ureter) Procedure Using an Endoscope	80 - Assistant Surgeon	1/1/2021
50949	Urinary Duct (Ureter) Procedure Using an Endoscope	81 - Minimum Assistant Surgeon	3/1/2021
50949	Urinary Duct (Ureter) Procedure Using an Endoscope	82 - Assist Surg/Qual Resident Surg Not Avail	3/1/2021
57156	Insertion of Radiation Therapy Devices in Vagina for Radiation Therapy	PN – Non-Excepted Service Procedure	1/1/2021
67808	Removal Of Eyelid Growth Under General Anesthesia and/or requiring hospitalization	LT - Identifies Left Side	8/1/2021
67808	Removal Of Eyelid Growth Under General Anesthesia and/or requiring hospitalization	RT - Identifies Right Side	8/1/2021
69110	Removal Of Portion of External Ear	50 - Bilateral Procedure (Pay 50%)	1/1/2021
69145	Removal of Soft Tissue Growth of Ear Canal	50 - Bilateral Procedure (Pay 50%)	1/1/2021
81243	Gene Analysis (Fragile X Mental Retardation) Abnormal Alleles	59 - Distinct Procedural Service	8/1/2020
81243	Gene Analysis (Fragile X Mental Retardation) Abnormal Alleles	XE - Separate Enc A Serv Tha	8/1/2020
81243	Gene Analysis (Fragile X Mental Retardation) Abnormal Alleles	XP - Separate Practitioner, A	8/1/2020
81243	Gene Analysis (Fragile X Mental Retardation) Abnormal Alleles	XS - Separate Structure, A SE	8/1/2020
81243	Gene Analysis (Fragile X Mental Retardation) Abnormal Alleles	XU - Unusual Non-Overlapping	8/1/2020
81243	Gene Analysis (Fragile X Mental Retardation) Abnormal Alleles	59 - Distinct Procedural Service	8/1/2020
81243	Gene Analysis (Fragile X Mental Retardation) Abnormal Alleles	XE - SEPARATE ENC, A SERV THA	8/1/2020

Code	Description	Modifiers	Effective Begin Date
81243	Gene Analysis (Fragile X Mental Retardation) Abnormal Alleles	XP - SEPARATE PRACTITIONER, A	8/1/2020
81243	Gene Analysis (Fragile X Mental Retardation) Abnormal Alleles	XS - SEPARATE STRUCTURE, A SE	8/1/2020
81243	Gene Analysis (Fragile X Mental Retardation) Abnormal Alleles	XU - UNUSUAL NON-OVERLAPPING	8/1/2020
81401	Molecular Pathology Procedure Level 2	59 - Distinct Procedural Service	10/1/2020
81405	Molecular Pathology Procedure Level 6	59 - Distinct Procedural Service	10/1/2020
81406	Molecular Pathology Procedure Level 7	59 - Distinct Procedural Service	10/1/2020
90636	Vaccine for Hepatitis A and Hepatitis B injection into muscle, adult dosage	SL - State Supplied Vaccine	1/1/2021
E2500	Speech Generating Device, digitized speech, using pre-recorded messages, less than or equal to 8 minutes recording time	KX - Requirements Specified in the Medical Policy	1/1/2021
E2502	Speech Generating Device, digitized speech, using pre-recorded messages, greater than 8 minutes but less than or equal to 20 minutes recording time	KX - Requirements Specified in the Medical Policy	1/1/2021
E2504	Speech generating device, digitized speech, using pre-recorded messages, greater than 20 minutes but less than or equal to 40 minutes recording time	KX - Requirements Specified in the Medical Policy	1/1/2021
E2506	Speech generating device, digitized speech, using pre-recorded messages, greater than 40 minutes recording time	KX - Requirements Specified in the Medical Policy	1/1/2021
E2508	Speech generating device, synthesized speech, requiring message formulation by spelling and access by physical contact with the device	KX - Requirements Specified in the Medical Policy	1/1/2021
E2510	Speech Generating Device, synthesized speech, permitting multiple methods of message formulation and multiple methods of device access	KX - Requirements Specified in the Medical Policy	1/1/2021
E2511	Speech generating software program, for personal computer or personal digital assistant	KX - Requirements Specified in the Medical Policy	1/1/2021
E2512	Accessory for speech generating device, mounting system	KX - Requirements Specified in the Medical Policy	1/1/2021
G0452	Molecular Pathology Procedure; Physician Interpretation and Report	59 - Distinct Procedural Service	11/1/2020
G0452	Molecular Pathology Procedure; Physician Interpretation and Report	59 - Distinct Procedural Service	11/1/2020
G0466	Federally Qualified Health Center (FQHC) Visit, New Patient;	CG - Innovator Drug Disp/Policy Criteria Appl	1/1/2022
G0466	Federally Qualified Health Center (FQHC) Visit, New Patient;	GV - Att Phys Not Emp or Pd Under Arrange Pat	1/1/2022

Code	Description	Modifiers	Effective Begin Date
G0467	Federally Qualified Health Center (FQHC) Visit, Es-established Patient;	CG - Innovator Drug Disp/Policy Criteria Appl	1/1/2022
G0467	Federally Qualified Health Center (FQHC) Visit, Es-established Patient;	GV - Att Phys Not Emp or Pd Under Arrange Pat	1/1/2022
G0468	Federally Qualified Health Center (FQHC) Visit, IPPE or AWW;	CG - Innovator Drug Disp/Policy Criteria Appl	1/1/2022
G0468	Federally Qualified Health Center (FQHC) Visit, IPPE or AWW;	GV - Att Phys Not Emp or Pd Under Arrange Pat	1/1/2022
G0469	Federally Qualified Health Center (FQHC) Visit, Mental Health New Patient	CG - Innovator Drug Disp/Policy Criteria Appl	1/1/2022
G0469	Federally Qualified Health Center (FQHC) Visit, Mental Health New Patient	GV - Att Phys Not Emp or Pd Under Arrange Pat	1/1/2022
G0470	Federally Qualified Health Center (FQHC) Visit, Mental Health, Established Patient;	CG - Innovator Drug Disp/Policy Criteria Appl	1/1/2022
G0470	Federally Qualified Health Center (Fqhc) Visit, Mental Health, Established Patient;	GV - Att Phys Not Emp or Pd Under Arrange Pat	1/1/2022
H0034	Medication Training and Support, per 15 minutes	UD - Telehealth/MCD LVL Care	3/17/2020
H0034	Medication Training and Support, per 15 minutes	UD - Telehealth/MCD LVL Care	3/17/2020
J9229	Injection, Inotuzumab Ozogamicin, 0.1 mg	JG- Drug 340B Price Dsct Pro	10/1/2020
J9229	Injection, Inotuzumab Ozogamicin, 0.1 mg	JW - Drug Amt Discarded/Not A	10/1/2020
J9229	Injection, Inotuzumab Ozogamicin, 0.1 mg	JG- Drug 340B Price Dsct Pro	10/1/2020
J9229	Injection, Inotuzumab Ozogamicin, 0.1 mg	JW - Drug Amt Discarded/Not A	10/1/2020
J9358	Injection, Fam-Trastuzumab Deruxtecan-Nxki, 1 mg	JW - Drug Amt Discarded/Not A	1/1/2021
J9358	Injection, Fam-Trastuzumab Deruxtecan-Nxki, 1 mg	JW - Drug Amt Discarded/Not A	1/1/2021
Q5104	Injection, Infliximab-ABDA, Biosimilar, (Renflexis), 10 mg	JG - Drug 340B Price Dsct Program/Non Hosp To	1/1/2021
Q5104	Injection, Infliximab-ABDA, Biosimilar, (Renflexis), 10 mg	JG - Drug 340B Price Dsct Program/Non Hosp To	1/1/2021
S5140	Foster Care, Adult; Per Diem	HB - Adult Program, Non-Geriatric	10/1/2021
S5140	Foster Care, Adult; Per Diem	HC - Adult Program, Geriatric	10/1/2021
S5140	Foster Care, Adult; Per Diem	HB - Adult Program, Non-Geriatric	10/1/2021
S5140	Foster Care, Adult; Per Diem	HC - Adult Program, Geriatric	10/1/2021

Code	Description	Modifiers	Effective Begin Date
S5145	Foster Care, Therapeutic, Child; Per Diem	UF - Services Provided, Morning	10/1/2021
S5145	Foster Care, Therapeutic, Child; Per Diem	UG - Services Provided, Afternoon	10/1/2021
S5145	Foster Care, Therapeutic, Child; Per Diem	UH - Services Provided, Evening	10/1/2021
S5145	Foster Care, Therapeutic, Child; Per Diem	UF - Services Provided, Morning	10/1/2021
S5145	Foster Care, Therapeutic, Child; Per Diem	UG - Services Provided, Afternoon	10/1/2021
S5145	Foster Care, Therapeutic, Child; Per Diem	UH - Services Provided, Evening	10/1/2021

### **New Modifiers**

Effective for January 1, 2022 the following modifiers have been added to the Reference System.

**Please refer to the Medical Coding Resources page for updates on use of these modifiers. These modifiers are only on our base tables at this time.**

MODIFIERS	LONG DESCRIPTION
FQ	The service was furnished using audio-only communication technology
FR	The supervising practitioner was present through two-way, audio/video communication technology
FS	Split (or shared) evaluation and management visit
FT	Unrelated evaluation and management (e/m) visit during a postoperative period, or on the same day as a procedure or another e/m visit. (report when an e/m visit is furnished within the global period but is unrelated, or when one or more additional e/m visits furnished on the same day are unrelated)

**Modifier End Dated**

Effective December 31, 2021 the modifier UD (Telehealth/MCD LVL CA) will be end dated.\_

90791	90853	96133	96170	99204	99243	99358	H0031	T2021
90792	92507	96136	96171	99205	99244	99359	H0034	
90832	92508	96137	97110	99211	99245	99411	H2011	
90833	92521	96138	97129	99212	99341	99412	H2027	
90834	92522	96139	97130	99213	99342	99417	H2033	
90836	92523	96156	97150	99214	99343	99421	S5100	
90837	92524	96158	97156	99215	99344	99422	S9480	
90838	92526	96159	97158	99231	99347	99423	T1002	
90839	96116	96160	97530	99232	99348	99497	T1003	
90840	96121	96161	97535	99233	99349	99498	T1015	
90845	96127	96164	97802	99234	99354	H0001	T2016	
90846	96130	96165	97803	99235	99355	H0002	T2017	
90847	96131	96167	97804	99241	99356	H0004	T2019	
90849	96132	96168	99202	99242	99357	H0005	T2020	

Please review the Medical Coding Resources News that will be published in Mid-December regarding these changes to our Telehealth Policy. If you have any questions, please email: [codingpolicyquestions@azahcccs.gov](mailto:codingpolicyquestions@azahcccs.gov).

**Modifier Description Changes**

The descriptions have been changed for the following modifiers.

UF - CO-OCCURRING BH-PH COND/SVCS MORNING

UG - CO-OCCURRING BH COGNITIVE/SVCS AFTERNOON

UH - PRIMARYPSYCHOTICCOND/SVC EVENING

**New Codes**

Effective for dates of service listed, the following codes have been added to the Reference screens.

<b>Code</b>	<b>Description</b>	<b>Effective Begin Date</b>
0004A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, MRNALNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, diluent reconstituted, booster	01/01/2021
0051A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, MRNALNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, tris-sucrose formulation; first dose	01/01/2021
0052A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, MRNALNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, tris-sucrose formulation; second dose	01/01/2021
0053A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, MRNALNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, tris-sucrose formulation; third dose	01/01/2021
0054A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, MRNALNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, tris-sucrose formulation; booster	01/01/2021
0064A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, MRNALNP, spike protein, preservative free, 50 mcg/0.25 ml dosage, booster dose	01/01/2021
91305	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, Trissucrose formulation, for intramuscular use (Pfizer)	01/01/2021
91306	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 50 mcg/0.25 mL dosage, for intramuscular use (Moderna)	01/01/2021
XW013H6	Introduction of Other New Technology Monoclonal Antibody into Subcutaneous Tissue, Percutaneous Approach, New Technology Group 6	01/01/2021
XW013K6	Introduction of Leronlimab Monoclonal Antibody into Subcutaneous Tissue, Percutaneous Approach, New Technology Group 6	01/01/2021
XW013S6	Introduction of COVID-19 Vaccine Dose 1 into Subcutaneous Tissue, Percutaneous Approach, New Technology Group 6	01/01/2021
XW013T6	Introduction of COVID-19 Vaccine Dose 2 into Subcutaneous Tissue, Percutaneous Approach, New Technology Group 6	01/01/2021
XW013U6	Introduction of COVID-19 Vaccine into Subcutaneous Tissue, Percutaneous Approach, New Technology Group 6	01/01/2021
XW01X27	Introduction of Bromelain-enriched Proteolytic Enzyme into Subcutaneous Tissue, External Approach, New Technology Group 7	10/01/2021
XW0DXM6	Introduction of Baricitinib into Mouth and Pharynx, External Approach, New Technology Group 6	01/01/2021



## Place of Service

POS update on Status C codes from the CMS IP only list. This was a request from a Health plan to update our Inpatient only files to reflect the correct POS for Inpatient codes as published by CMS. IP only claims should only use the POS 06, 08, 21 and with very rare exceptions should POS 19/22 ever be allowed.

## Place of Service-Description Changes

The descriptions for the POS 02 and 10 have changed. **Please refer to the Medical Coding Resources page for upcoming possible changes. These POS are for description changes only and until further notice, no other changes for these two modifiers and use have been made yet. When this happens, it will be published on the Medical Coding Resources page.**

02 – The location where health services and health related services are provided or received, through telecommunication technology. Patients are not located in their home when receiving health services or health related services through telecommunication technology.

10 – The location where health services and health related services are provided or received through telecommunication technology. Patient is located in their home (which is a location other than a hospital or other facility where the patient receives care).

- ◆ The following Place of Service have been added to the system.

Code	Description	Place of Service	Begin Date
D9222	Deep Sedation/General Anesthesia - First 15 Minutes	15 - Mobile Unit	10/01/2021
Q4244	Procenta, Per 200 mg	11 – Office	07/01/2020
T1002	RN Services, Up To 15 Minutes	19 - Off Campus-Outpatient Hospital	10/01/2021
T1002	RN Services, Up To 15 Minutes	22 -Outpatient Hospital	10/01/2021

## Procedure Daily Limits

The Procedure Daily Limits have been updated for the following HCPCS codes.

Code	Description	Procedure Daily Limit
D1510	Space Maintainer - Fixed, Unilateral - per quadrant	4
J0588	Injection, Incobotulinumtoxin A, 1 Unit	600
J1459	Injection, Immune Globulin (Privigen), Intravenous, Non-Lyophilized (E.G Liquid), 500 mg	300
J9060	Injection, Cisplatin, powder, or solution 10 mg	25
J9210	Injection, Emapalumab-LZSG, 1 mg	1500

**Provider Type**

Effective for dates of service listed the following codes have been added to the provider types.

Code	Description	Provider Type	Begin Date
E0486	Oral Device/Appliance Used to Reduce Upper Airway Collapsibility,	07 - Dentist	10/1/2021
12054	Repair of Wound (7.6 To 12.5 Centimeters) Of Face, Ears, Eyelids, Nose, Lips, and/or Mouth	19 - Registered Nurse Practitioner	10/4/2020
20552	Injections Of Trigger Points In 1 Or 2 Muscles	07 - Dentist	10/1/2021
20553	Injections Of Trigger Points In 3 or more muscles	07 - Dentist	10/1/2021
21210	Repair of Nasal or Cheek Bone with bone graft	07 - Dentist	6/1/2021
21215	Repair of Lower Jawbone with Bone Graft	07 - Dentist	6/1/2021
29705	Removal or Bivalving of Full Arm or Leg Cast	14 - Physical Therapist	10/1/2020
64400	Injection Of Anesthetic Agent and/or Steroid into Trigeminal Nerve	07 - Dentist	10/1/2021
64405	Injection of anesthetic agent and/or steroid into greater occipital nerve of upper neck and back of head	07 - Dentist	10/1/2021
64450	Injection Of Anesthetic Agent and/or Steroid into Other Peripheral Nerve Or branch	07 - Dentist	10/1/2021
64612	Injection Of Chemical for Destruction of Nerve Muscles on One Side Of Face	07 - Dentist	10/1/2021
70250	X-Ray Of Skull, Less Than 4 Views	07 - Dentist	10/1/2021
72040	X-Ray Spine of Neck, 2 Or 3 Views	07 - Dentist	10/1/2021
76100	Single Plane Imaging Procedure	07 - Dentist	10/1/2021
76102	Complex Motion Imaging Procedure on Both Sides of Body	07 - Dentist	10/1/2021
96112	Developmental Test Administration by Qualified Health Care Professional with interpretation and report, first 60 minutes	13 - Occupational Therapist	1/1/2021

<b>Code</b>	<b>Description</b>	<b>Provider Type</b>	<b>Effective Begin Date</b>
D1701*	Pfizer-Biontech COVID-19 Vaccine Administration - First	07 – Dentist	07/01/2021
D1702*	Pfizer-BioNTech Covid-19 vaccine administration - second dose; SARSCOV2 COVID-19 VAC MRNA 30mcg/0.3mL IM dose 2	07 – Dentist	07/01/2021
D1703*	Moderna Covid-19 vaccine administration - first dose; SARSCOV2 COVID-19 VAC MRNA 100mcg/0.5mL IM dose 1	07 – Dentist	07/01/2021
D1704*	Moderna Covid-19 vaccine administration - second dose; SARSCOV2 COVID-19 VAC MRNA 100mcg/0.5mL IM dose 2	07 – Dentist	07/01/2021
D1705*	AstraZeneca Covid-19 vaccine administration - first dose; SARSCOV2 COVID-19 VAC rS-ChAdOx1 5x1010 VP/.5mL IM dose 1	07 – Dentist	07/01/2021
D1706*	AstraZeneca Covid-19 vaccine administration - second dose; SARSCOV2 COVID-19 VAC rS-ChAdOx1 5x1010 VP/.5mL IM dose 2	07 – Dentist	07/01/2021
D1707*	Janssen Covid-19 vaccine administration; SARSCOV2 COVID-19 VAC Ad26 5x1010 VP/.5mL IM single dose	07 – Dentist	07/01/2021
G2068**	Medication assisted treatment, Buprenorphine (oral); weekly bundle	IC – Integrated Clinics	01/01/2020
G2069**	Medication assisted treatment, Buprenorphine (injectable); weekly	IC – Integrated Clinics	01/01/2020
G2070**	Medication assisted treatment, Buprenorphine (implant insertion);	IC – Integrated Clinics	01/01/2020
G2071**	Medication assisted treatment, Buprenorphine (implant removal);	IC – Integrated Clinics	01/01/2020
G2072**	Medication assisted treatment, Buprenorphine (implant insertion)	IC – Integrated Clinics	01/01/2020
G2073**	Medication assisted treatment, Naltrexone; weekly bundle	IC – Integrated Clinics	01/01/2020
G2074**	Medication assisted treatment, weekly bundle not including the drug	IC – Integrated Clinics	01/01/2020
G2075**	Medication assisted treatment, medication not otherwise specified	IC – Integrated Clinics	01/01/2020
G2076**	Intake activities, including initial medical examination	IC – Integrated Clinics	01/01/2020
G2079**	Take-home supply of Buprenorphine (oral);	IC – Integrated Clinics	01/01/2020

NOTE\* The Dental Codes (Those starting with D) are not covered

NOTE\*\* The G Codes have AHCCCS Coverage of 09 (Medicare Only)

<b>Code</b>	<b>Description</b>	<b>Provider Type</b>	<b>Begin Date</b>
E0486	Oral Device/Appliance Used to Reduce Upper Airway Collapsibility,	07 - Dentist	10/1/2021
12054	Repair of Wound (7.6 To 12.5 Centimeters) Of Face, Ears, Eyelids, Nose, Lips, and/or Mouth	19 - Registered Nurse Practitioner	10/4/2020
20552	Injections Of Trigger Points In 1 Or 2 Muscles	07 - Dentist	10/1/2021
20553	Injections Of Trigger Points In 3 or more muscles	07 - Dentist	10/1/2021
21210	Repair of Nasal or Cheek Bone with bone graft	07 - Dentist	6/1/2021
21215	Repair of Lower Jawbone with Bone Graft	07 - Dentist	6/1/2021
29705	Removal or Bivalving of Full Arm or Leg Cast	14 - Physical Therapist	10/1/2020
64400	Injection Of Anesthetic Agent and/or Steroid into Trigeminal Nerve	07 - Dentist	10/1/2021
64405	Injection of anesthetic agent and/or steroid into greater occipital nerve of upper neck and back of head	07 - Dentist	10/1/2021
64450	Injection Of Anesthetic Agent and/or Steroid into Other Peripheral Nerve Or branch	07 - Dentist	10/1/2021
64612	Injection Of Chemical for Destruction of Nerve Muscles on One Side Of Face	07 - Dentist	10/1/2021
70250	X-Ray Of Skull, Less Than 4 Views	07 - Dentist	10/1/2021
72040	X-Ray Spine of Neck, 2 Or 3 Views	07 - Dentist	10/1/2021
76100	Single Plane Imaging Procedure	07 - Dentist	10/1/2021
76102	Complex Motion Imaging Procedure on Both Sides of Body	07 - Dentist	10/1/2021
96112	Developmental Test Administration by Qualified Health Care Professional with interpretation and report, first 60 minutes	13 - Occupational Therapist	1/1/2021

Code	Description	Provider Type	Effective Begin Date
0031A	Administration of Coronavirus Vaccine 4, Dose 1	03 – Pharmacy	02/27/2021
96127	Brief Emotional or Behavioral Assessment	05 - Clinic	01/01/2021
96156	Health Behavior Assessment, or Re-Assessment	05 - Clinic	01/01/2021
96158	Health Behavior Intervention, Individual, Face-To-Face; Initial 30 Minutes	05 - Clinic	01/01/2021
96159	Health Behavior Intervention, Individual, Face-To-Face; Each Additional 15 Minutes	05 - Clinic	01/01/2021
U0002	2019-NCOV CORONAVIRUS, SARS-COV-2/2019-NCOV (COVID-19), any technique, multiple types or subtypes (includes all targets), NON-CDC	08 - MD-Physician	01/01/2021
96112	Developmental Test administration by qualified health care professional with interpretation and report, first 60 minutes	15 - Speech/Hearing Therapist	01/01/2021
96113	Developmental Test administration by qualified health care professional with interpretation and report, additional 60 minutes	15 - Speech/Hearing Therapist	01/01/2021
U0002	2019-NCOV Coronavirus, SARS-COV-2/2019-NCOV (COVID-19), any technique, multiple types or subtypes (includes all targets), Non-CDC	18 - Physicians Assistant	01/01/2021
M0243	Intravenous infusion, Casirivimab and Imdevimab includes infusion and post administration monitoring	19 - Registered Nurse Practitioner	11/21/2020
U0002	2019-NCOV CORONAVIRUS, SARS-COV-2/2019-NCOV (COVID-19), any technique, multiple types or subtypes (includes all targets), NON-CDC	19 - Registered Nurse Practitioner	01/01/2021
U0002	2019-NCOV Coronavirus, SARS-COV-2/2019-NCOV (COVID-19), any technique, multiple types or subtypes (includes all targets), Non-CDC	31 - DO-Physician Osteopath	01/01/2021
C1761	Catheter, Transluminal Intravascular Lithotripsy, Corona	43 - Ambulatory Surgical Center	07/01/2021

### **TPL Indicator**

The TPL Indicator has been changed to Y for the HCPCS code A0998 ( Ambulance Response and Treatment, No Transport).

### **Third Party Liability**

The following HCPCS codes have had the Third-Party Liability flag changed to N (No) on the codes below:

H0001      H0019      H020      H2010      T1002  
T1003      T1020      T1503      T2020      T2026      S0209

