

Relative Resource Use for People With Cardiovascular Conditions (RCA)

Description

The relative resource use by members with cardiovascular conditions during the measurement year.

Eligible Population

Note: Organizations must report the quality measures (CMC and PBH) when reporting RCA.

Product lines	Commercial, Medicaid, Medicare (report each product line separately).
Ages	18–75 years as of December 31 of the measurement year.
Continuous enrollment	The measurement year and the year prior to the measurement year.
Allowable gap	No more than one gap in enrollment of up to 45 days during each year of continuous enrollment. To determine continuous enrollment for a Medicaid beneficiary for whom enrollment is verified monthly, the member may not have more than a 1-month gap in coverage (i.e., a member whose coverage lapses for 2 months [60 days] is not considered continuously enrolled).
Anchor date	December 31 of the measurement year.
Benefit	Medical.
Event/ diagnosis	<p>Members are identified for the eligible population by event or by diagnosis. The organization must use <i>both</i> to identify the eligible population, but a member need only be identified in one to be included in the measure.</p> <p><i>Event.</i> Any of the following during the year prior to the measurement year meet criteria:</p> <ul style="list-style-type: none"> • <i>AMI.</i> Discharged alive from an acute inpatient setting with an AMI (<u>AMI Value Set</u>). Use both facility and professional claims to identify AMI. • <i>CABG.</i> Discharged alive from an acute inpatient setting with a CABG (<u>CABG Value Set</u>). Use both facility and professional claims to identify CABG. • <i>PCI.</i> Members who had PCI (<u>PCI Value Set</u>) in any setting (e.g., inpatient, outpatient, ED). <p><i>Diagnosis.</i> Identify members as having IVD who met at least either of the following criteria during both the measurement year and the year prior to the measurement year. Criteria need not be the same across both years.</p> <ul style="list-style-type: none"> • At least one outpatient visit (<u>Outpatient Value Set</u>) with an IVD diagnosis (<u>IVD Value Set</u>). • At least one acute inpatient visit (<u>Acute Inpatient Value Set</u>) with an IVD diagnosis (<u>IVD Value Set</u>).

Exclusions (required)

Refer to *Required Exclusions* in the *Guidelines for Relative Resource Use*.

Categorization of Eligible Population

Major clinical condition	Cardiovascular condition.
Risk Group	Refer to the <i>RRU Risk Adjustment</i> in the <i>Guidelines for Relative Resource Use</i> .

Standard Cost Calculations

The organization reports total standard costs of all services for which the organization has paid or expects to pay for the eligible population during the treatment period. Total standard costs are assigned by matching codes for services rendered to codes listed in the NCQA SPTs (the tables will be posted to NCQA's Web site by November 1, 2013).

Apply standard price SPTs categorize services as follows:

- Inpatient Facility.
- E&M:
 - Inpatient Services.
 - Outpatient Services.
- Laboratory Services.
- Surgery and Procedure:
 - Inpatient Services.
 - Outpatient Services.
- Imaging Services.
- Pharmacy.

Count all services listed in the SPTs rendered to members in the eligible population during the treatment period. Refer to the *Calculating Standard Cost* instructions in the *Guidelines for Relative Resource Use* for steps on categorizing services and linking service data to NCQA's SPTs.

Calculate total cost Sum the total standard cost for each eligible member. Within each service category, if a member's standard cost exceeds the service category cap amount, report the total standard cost specified in the NCQA Cost Cap Amounts table (released with the SPTs).

Sum and report the total standard cost for the eligible population in each service category by member cohort.

Service Frequency Calculations

Total frequency of service Service frequency counts are reported for all services for which the organization has paid or expects to pay for the eligible population during the treatment period. The measure captures each eligible member's services rendered during the treatment period for the following utilization categories:

- Acute Medicine: Discharges, Days.
- Acute Surgery: Discharges, Days.
- Nonacute: Discharges, Days.
- ED Discharges.

- Pharmacy Utilization:
 - Name brand only (N1).
 - Name brand—Generic exists (N2).
 - Generic only (G1).
 - Generic name—Name brand exists (G2).

Other Condition-Specific Categories

- Cardiac Catheterization.
- PCI.
- CABG.
- Carotid Endarterectomy.
- Carotid Artery Stenosis Diagnostic Test.
- Cardiac Computed Tomography.
- CAD Diagnostic Test Using EBCT/Nuclear Imaging Stress Test.

Refer to the instructions in the *Guidelines for Relative Resource Use*. The *Pharmacy Utilization* categories are included in Table SPT—Pharm.

Inpatient Facility

This category measures the number of acute and nonacute inpatient facility discharges and days, regardless of diagnosis. Count each discharge once. Include data from any institution that provides acute or long-term/specialty nonacute care.

Refer to the *Guidelines for Relative Resource Use* to identify acute inpatient (including medicine and surgery) and nonacute discharges and days.

ED Discharges

This category measures use of ED services.

Count each visit to an ED during the treatment period that does not result in an inpatient stay, regardless of the intensity of care required during the stay or the length of stay. Count only one ED visit per date of service. Do not count visits to urgent care centers. Services for members admitted to the hospital from an ED visit are included in the Inpatient Facility category only.

Identify ED visits using either of the following:

- An ED visit (ED Value Set).
- A procedure code (ED Procedure Code Value Set) with an ED place of service code (ED POS Value Set).

Pharmacy Utilization

Use Table SPT—Pharm to identify the prescription categories for each drug dispensed in the treatment period.

Sum and report the number of prescriptions in each of the four categories in the Pharmacy—Total Service Frequency by Prescription Category table.

Other Condition-Specific Categories

Use the information below and refer to the instructions in the *Guidelines for Relative Resource Use*.

Cardiac catheterization	<p>Cardiac catheterization (<u>Cardiac Catheterization Value Set</u>). Report all cardiac catheterizations performed separately. Do not report a cardiac catheterization performed in conjunction with (i.e., on the same date of service as) a PCI in the cardiac catheterization rate; report only the PCI.</p> <p>Do not report PCI or cardiac catheterization performed in conjunction with (i.e., on the same date of service as) a CABG in the PCI or the cardiac catheterization rate; report only the CABG.</p>
PCI	<p>Percutaneous coronary intervention (<u>PCI Value Set</u>). Report all PCIs performed separately. Do not report PCI or cardiac catheterization performed in conjunction with (i.e., on the same date of service as) a CABG in the PCI or the cardiac catheterization rate; report only the CABG.</p>
CABG	<p>Coronary artery bypass graft (<u>CABG Value Set</u>). Coronary artery bypass graft. Report each CABG only once for each date of service per patient, regardless of the number of arteries involved or the number or types of grafts involved.</p> <p>Do not report PCI or cardiac catheterization performed in conjunction with (i.e., on the same date of service as) a CABG in the PCI or the cardiac catheterization rate; report only the CABG.</p>
Carotid endarterectomy	<p>Carotid endarterectomy (<u>Carotid Endarterectomy Value Set</u>). Report the number of carotid endarterectomies.</p>
CAS diagnostic test	<p>Carotid artery stenosis diagnostic test (<u>CAS Tests Value Set</u>). Report the number of CAS diagnostic tests.</p>
Cardiac CT	<p>Cardiac computed tomography (<u>Cardiac CT Value Set</u>). Report the number of cardiac CTs.</p>
CAD diagnostic test using EBCT/ nuclear imaging stress tests	<p>Coronary artery disease diagnostic tests using EBCT and nuclear imaging stress tests (<u>CAD Tests Value Set</u>). Report the number of CAD diagnostic tests using EBCT and nuclear imaging stress tests.</p>

Data Elements for Reporting

Table RCA-A-1/2/3: Data Elements for Relative Resource Use for People With Cardiovascular Conditions

Metadata ID	Metadata Specification Name
EligiblePopulation	Eligible Population
Exclusions	Exclusions
NameBrandOnlyCount	Pharmacy: Name Brand only (N1)
NameBrandGenericExistsCount	Pharmacy: Name Brand—Generic Exists (N2)
GenericOnlyCount	Pharmacy: Generic Only (G1)
GenericNameBrandExistsCount	Pharmacy: Generic—Name Brand Exists (G2)

Table RCA-B-1/2/3: Data Elements for Relative Resource Use for People With Cardiovascular Conditions

Gender	Age	Risk Group	Type	Metric Specification Name
Male	18-44	1	Cost	Inpatient Facility
Female	45-54	2	Cost	E&M Inpatient Services
	55-64	3	Cost	E&M Outpatient Services
	65-75	4	Cost	Surgery & Procedure Inpatient Services
		5	Cost	Surgery & Procedure Outpatient Services
		6	Cost	Imaging Services
		7	Cost	Laboratory Services
		8	Cost	Pharmacy
		9	Count	Inpatient Facility: Acute Inpatient: Medical Days
		10	Count	Inpatient Facility: Acute Inpatient: Medical Discharges
		11	Count	Inpatient Facility: Acute Inpatient: Surgery Days
		12	Count	Inpatient Facility: Acute Inpatient: Surgery Discharges
		13	Count	Inpatient Facility: Nonacute: Days
			Count	Inpatient Facility: Nonacute: Discharges
			Count	ED Discharges
			Count	Cardiac Catheterization
			Count	PCI
			Count	CABG
			Count	Carotid Endarterectomy
			Count	Carotid Artery Stenosis Diagnostic Test
			Count	Cardiac Computed Tomography
			Count	CAD Diagnostic Test Using EBCT/Nuclear Imaging Stress Test
			Mem	Member Months Medical
			Mem	Member Months Pharmacy

Value Set Name	Value Set OID	Code	Definition	Code System
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	99221		CPT
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	99222		CPT
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	99223		CPT
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	99231		CPT
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	99232		CPT
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	99233		CPT
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	99238		CPT
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	99239		CPT
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	99251		CPT
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	99252		CPT
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	99253		CPT
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	99254		CPT
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	99255		CPT
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	99291		CPT
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0100	All-inclusive room and board plus ancillary	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0101	All-inclusive room and board	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0110	General	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0111	Medical/surgical/GYN	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0112	Obstetrics (OB)	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0113	Pediatric	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0114	Psychiatric	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0119	Other	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0120	General	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0121	Medical/surgical/GYN	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0122	OB	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0123	Pediatric	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0124	Psychiatric	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0129	Other	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0130	General	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0131	Medical/surgical/GYN	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0132	OB	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0133	Pediatric	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0134	Psychiatric	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0139	Other	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0140	General	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0141	Medical/surgical/GYN	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0142	OB	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0143	Pediatric	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0144	Psychiatric	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0149	Other	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0150	General	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0151	Medical/surgical/GYN	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0152	OB	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0153	Pediatric	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0154	Psychiatric	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0159	Other	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0160	General	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0164	Sterile environment	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0167	Self-care	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0169	Other	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0200	General	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0201	Surgical	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0202	Medical	UBREV

Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0203	Pediatric	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0204	Psychiatric	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0206	Intermediate intensive care unit (ICU)	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0207	Burn care	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0208	Trauma	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0209	Other intensive care	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0210	General	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0211	Myocardial infarction	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0212	Pulmonary care	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0213	Heart transplant	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0214	Intermediate coronary care unit (CCU)	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0219	Other coronary care	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0720	General	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0721	Labor	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0722	Delivery	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0723	Circumcision	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0724	Birthing center	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0729	Other labor room/delivery	UBREV
Acute Inpatient	2.16.840.1.113883.3.464.1004.1017	0987	Hospital visit	UBREV
AMI	2.16.840.1.113883.3.464.1004.1009	410.01	AMI anterolateral, init	ICD9CM
AMI	2.16.840.1.113883.3.464.1004.1009	410.11	AMI anterior wall, init	ICD9CM
AMI	2.16.840.1.113883.3.464.1004.1009	410.21	AMI inferolateral, init	ICD9CM
AMI	2.16.840.1.113883.3.464.1004.1009	410.31	AMI inferopost, initial	ICD9CM
AMI	2.16.840.1.113883.3.464.1004.1009	410.41	AMI inferior wall, init	ICD9CM
AMI	2.16.840.1.113883.3.464.1004.1009	410.51	AMI lateral NEC, initial	ICD9CM
AMI	2.16.840.1.113883.3.464.1004.1009	410.61	True post infarct, init	ICD9CM
AMI	2.16.840.1.113883.3.464.1004.1009	410.71	Subendo infarct, initial	ICD9CM
AMI	2.16.840.1.113883.3.464.1004.1009	410.81	AMI NEC, initial	ICD9CM
AMI	2.16.840.1.113883.3.464.1004.1009	410.91	AMI NOS, initial	ICD9CM
CABG	2.16.840.1.113883.3.464.1004.1048	33510		CPT
CABG	2.16.840.1.113883.3.464.1004.1048	33511		CPT
CABG	2.16.840.1.113883.3.464.1004.1048	33512		CPT
CABG	2.16.840.1.113883.3.464.1004.1048	33513		CPT
CABG	2.16.840.1.113883.3.464.1004.1048	33514		CPT
CABG	2.16.840.1.113883.3.464.1004.1048	33516		CPT
CABG	2.16.840.1.113883.3.464.1004.1048	33517		CPT
CABG	2.16.840.1.113883.3.464.1004.1048	33518		CPT
CABG	2.16.840.1.113883.3.464.1004.1048	33519		CPT
CABG	2.16.840.1.113883.3.464.1004.1048	33521		CPT
CABG	2.16.840.1.113883.3.464.1004.1048	33522		CPT
CABG	2.16.840.1.113883.3.464.1004.1048	33523		CPT
CABG	2.16.840.1.113883.3.464.1004.1048	33533		CPT
CABG	2.16.840.1.113883.3.464.1004.1048	33534		CPT
CABG	2.16.840.1.113883.3.464.1004.1048	33535		CPT
CABG	2.16.840.1.113883.3.464.1004.1048	33536		CPT
			MINIMALLY INVASIVE DIRECT CORONARY ARTERY BYPASS SURGERY INVOLVING MINI-THORACOTOMY OR MINI-STERNOTOMY SURGERY, PERFORMED UNDER DIRECT VISION; USING ARTERIAL GRAFT(S), SINGLE CORONARY ARTERIAL GRAFT [S2205]	HCPCS
CABG	2.16.840.1.113883.3.464.1004.1048	S2205		
			MINIMALLY INVASIVE DIRECT CORONARY ARTERY BYPASS SURGERY INVOLVING MINI-THORACOTOMY OR MINI-STERNOTOMY SURGERY, PERFORMED UNDER DIRECT VISION; USING ARTERIAL GRAFT(S), TWO CORONARY ARTERIAL GRAFTS [S2206]	HCPCS
CABG	2.16.840.1.113883.3.464.1004.1048	S2206		
			MINIMALLY INVASIVE DIRECT CORONARY ARTERY BYPASS SURGERY INVOLVING MINI-THORACOTOMY OR MINI-STERNOTOMY SURGERY, PERFORMED UNDER DIRECT VISION; USING VENOUS GRAFT ONLY, SINGLE CORONARY VENOUS GRAFT [S2207]	HCPCS
CABG	2.16.840.1.113883.3.464.1004.1048	S2207		
			MINIMALLY INVASIVE DIRECT CORONARY ARTERY BYPASS SURGERY INVOLVING MINI-THORACOTOMY OR MINI-STERNOTOMY SURGERY, PERFORMED UNDER DIRECT VISION; USING SINGLE ARTERIAL AND VENOUS GRAFT(S), SINGLE VENOUS GRAFT [S2208]	HCPCS
CABG	2.16.840.1.113883.3.464.1004.1048	S2208		

			MINIMALLY INVASIVE DIRECT CORONARY ARTERY BYPASS SURGERY INVOLVING MINI-THORACOTOMY OR MINI- STERNOTOMY SURGERY, PERFORMED UNDER DIRECT VISION; USING TWO ARTERIAL GRAFTS AND SINGLE VENOUS GRAFT [S2209]	
CABG	2.16.840.1.113883.3.464.1004.1048	S2209		HCPCS
CABG	2.16.840.1.113883.3.464.1004.1048	36.10	Aortocoronary bypass NOS	ICD9PCS
CABG	2.16.840.1.113883.3.464.1004.1048	36.1	Bypass anastomosis for heart revascularization [36.1]	ICD9PCS
CABG	2.16.840.1.113883.3.464.1004.1048	36.11	Aortocor bypas-1 cor art	ICD9PCS
CABG	2.16.840.1.113883.3.464.1004.1048	36.12	Aortocor bypas-2 cor art	ICD9PCS
CABG	2.16.840.1.113883.3.464.1004.1048	36.13	Aortocor bypas-3 cor art	ICD9PCS
CABG	2.16.840.1.113883.3.464.1004.1048	36.14	Aortocor bypas-4+ cor art	ICD9PCS
CABG	2.16.840.1.113883.3.464.1004.1048	36.15	1 int mam-cor art bypass	ICD9PCS
CABG	2.16.840.1.113883.3.464.1004.1048	36.16	2 int mam-cor art bypass	ICD9PCS
CABG	2.16.840.1.113883.3.464.1004.1048	36.17	Abd-coron artery bypass	ICD9PCS
CABG	2.16.840.1.113883.3.464.1004.1048	36.19	Hrt revas byps anas NEC	ICD9PCS
CABG	2.16.840.1.113883.3.464.1004.1048	36.2	Arterial implant revasc	ICD9PCS
CAD Tests	2.16.840.1.113883.3.464.1004.1049	75557		CPT
CAD Tests	2.16.840.1.113883.3.464.1004.1049	75558		CPT
CAD Tests	2.16.840.1.113883.3.464.1004.1049	75559		CPT
CAD Tests	2.16.840.1.113883.3.464.1004.1049	75560		CPT
CAD Tests	2.16.840.1.113883.3.464.1004.1049	75561		CPT
CAD Tests	2.16.840.1.113883.3.464.1004.1049	75562		CPT
CAD Tests	2.16.840.1.113883.3.464.1004.1049	75563		CPT
CAD Tests	2.16.840.1.113883.3.464.1004.1049	75564		CPT
CAD Tests	2.16.840.1.113883.3.464.1004.1049	78451		CPT
CAD Tests	2.16.840.1.113883.3.464.1004.1049	78452		CPT
CAD Tests	2.16.840.1.113883.3.464.1004.1049	78453		CPT
CAD Tests	2.16.840.1.113883.3.464.1004.1049	78454		CPT
CAD Tests	2.16.840.1.113883.3.464.1004.1049	78459		CPT
CAD Tests	2.16.840.1.113883.3.464.1004.1049	78466		CPT
CAD Tests	2.16.840.1.113883.3.464.1004.1049	78468		CPT
CAD Tests	2.16.840.1.113883.3.464.1004.1049	78469		CPT
CAD Tests	2.16.840.1.113883.3.464.1004.1049	78472		CPT
CAD Tests	2.16.840.1.113883.3.464.1004.1049	78473		CPT
CAD Tests	2.16.840.1.113883.3.464.1004.1049	78481		CPT
CAD Tests	2.16.840.1.113883.3.464.1004.1049	78483		CPT
CAD Tests	2.16.840.1.113883.3.464.1004.1049	78491		CPT
CAD Tests	2.16.840.1.113883.3.464.1004.1049	78492		CPT
CAD Tests	2.16.840.1.113883.3.464.1004.1049	78494		CPT
CAD Tests	2.16.840.1.113883.3.464.1004.1049	S8092	ELECTRON BEAM COMPUTED TOMOGRAPHY (ALSO KNOWN AS ULTRAFAST CT, CINE CT) [S8092]	HCPCS
Cardiac Catheterization	2.16.840.1.113883.3.464.1004.1057	93451		CPT
Cardiac Catheterization	2.16.840.1.113883.3.464.1004.1057	93452		CPT
Cardiac Catheterization	2.16.840.1.113883.3.464.1004.1057	93453		CPT
Cardiac Catheterization	2.16.840.1.113883.3.464.1004.1057	93456		CPT
Cardiac Catheterization	2.16.840.1.113883.3.464.1004.1057	93457		CPT
Cardiac Catheterization	2.16.840.1.113883.3.464.1004.1057	93458		CPT
Cardiac Catheterization	2.16.840.1.113883.3.464.1004.1057	93459		CPT
Cardiac Catheterization	2.16.840.1.113883.3.464.1004.1057	93460		CPT
Cardiac Catheterization	2.16.840.1.113883.3.464.1004.1057	93461		CPT
Cardiac Catheterization	2.16.840.1.113883.3.464.1004.1057	37.21	Rt heart cardiac cath	ICD9PCS
Cardiac Catheterization	2.16.840.1.113883.3.464.1004.1057	37.22	Left heart cardiac cath	ICD9PCS
Cardiac Catheterization	2.16.840.1.113883.3.464.1004.1057	37.23	Rt/left heart card cath	ICD9PCS
Cardiac Catheterization	2.16.840.1.113883.3.464.1004.1057	88.55	Coronar arteriogr-1 cath	ICD9PCS
Cardiac Catheterization	2.16.840.1.113883.3.464.1004.1057	88.56	Coronar arteriogr-2 cath	ICD9PCS
Cardiac Catheterization	2.16.840.1.113883.3.464.1004.1057	88.57	Coronary arteriogram NEC	ICD9PCS
Cardiac CT	2.16.840.1.113883.3.464.1004.1056	75571		CPT
Cardiac CT	2.16.840.1.113883.3.464.1004.1056	75572		CPT
Cardiac CT	2.16.840.1.113883.3.464.1004.1056	75573		CPT
Cardiac CT	2.16.840.1.113883.3.464.1004.1056	75574		CPT
Carotid Endarterectomy	2.16.840.1.113883.3.464.1004.1058	34001		CPT
Carotid Endarterectomy	2.16.840.1.113883.3.464.1004.1058	35001		CPT
Carotid Endarterectomy	2.16.840.1.113883.3.464.1004.1058	35301		CPT
Carotid Endarterectomy	2.16.840.1.113883.3.464.1004.1058	35501		CPT
Carotid Endarterectomy	2.16.840.1.113883.3.464.1004.1058	35601		CPT
Carotid Endarterectomy	2.16.840.1.113883.3.464.1004.1058	38.12	Head & neck endarter NEC	ICD9PCS
CAS Tests	2.16.840.1.113883.3.464.1004.1050	36222		CPT
CAS Tests	2.16.840.1.113883.3.464.1004.1050	36223		CPT
CAS Tests	2.16.840.1.113883.3.464.1004.1050	36224		CPT

CAS Tests	2.16.840.1.113883.3.464.1004.1050	75660		CPT
CAS Tests	2.16.840.1.113883.3.464.1004.1050	75662		CPT
CAS Tests	2.16.840.1.113883.3.464.1004.1050	75665		CPT
CAS Tests	2.16.840.1.113883.3.464.1004.1050	75671		CPT
CAS Tests	2.16.840.1.113883.3.464.1004.1050	75676		CPT
CAS Tests	2.16.840.1.113883.3.464.1004.1050	75680		CPT
ED	2.16.840.1.113883.3.464.1004.1086	99281		CPT
ED	2.16.840.1.113883.3.464.1004.1086	99282		CPT
ED	2.16.840.1.113883.3.464.1004.1086	99283		CPT
ED	2.16.840.1.113883.3.464.1004.1086	99284		CPT
ED	2.16.840.1.113883.3.464.1004.1086	99285		CPT
ED	2.16.840.1.113883.3.464.1004.1086	0450	General	UBREV
ED	2.16.840.1.113883.3.464.1004.1086	0451	EMTALA emergency medical screening services	UBREV
ED	2.16.840.1.113883.3.464.1004.1086	0452	ER beyond EMTALA screening	UBREV
ED	2.16.840.1.113883.3.464.1004.1086	0456	Urgent care	UBREV
ED	2.16.840.1.113883.3.464.1004.1086	0459	Other ER	UBREV
ED	2.16.840.1.113883.3.464.1004.1086	0981	Emergency room	UBREV
ED POS	2.16.840.1.113883.3.464.1004.1087	23	Emergency Room - Hospital	POS
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	10040		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	10060		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	10061		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	10080		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	10081		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	10120		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	10121		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	10140		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	10160		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	10180		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11000		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11001		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11004		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11005		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11006		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11008		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11010		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11011		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11012		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11042		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11043		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11044		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11045		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11046		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11047		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11055		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11056		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11057		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11100		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11101		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11200		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11201		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11300		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11301		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11302		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11303		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11305		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11306		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11307		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11308		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11310		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11311		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11312		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11313		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11400		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11401		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11402		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11403		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11404		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11406		CPT
ED Procedure Code	2.16.840.1.113883.3.464.1004.1088	11420		CPT

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IVD	2.16.840.1.113883.3.464.1004.1137	413.1	Prinzmetal angina	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	413.9	Angina pectoris NEC/NOS	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	414.0	Coronary atherosclerosis [414.0]	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	414.00	Cor ath unsp vsl ntv/gft	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	414.01	Crnry athrsc native vssl	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	414.02	Crn ath atlg vn bps grft	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	414.03	Crn ath nonatlg blg grft	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	414.04	Cor ath artry bypas grft	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	414.05	Cor ath bypass graft NOS	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	414.06	Cor ath natv art tp hrt	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	414.07	Cor ath bps graft tp hrt	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	414.2	Chr tot occlus cor artry	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	414.8	Chr ischemic hrt dis NEC	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	414.9	Chr ischemic hrt dis NOS	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	429.2	Ascvd	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	433.0	Basilar artery [433.0]	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	433.00	Ocl bslr art wo infrct	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	433	Occlusion and stenosis of precerebral arteries [433]	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	433.01	Ocl bslr art w infrct	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	433.1	Carotid artery [433.1]	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	433.10	Ocl crtd art wo infrct	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	433.11	Ocl crtd art w infrct	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	433.20	Ocl vrtb art wo infrct	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	433.2	Vertebral artery [433.2]	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	433.21	Ocl vrtb art w infrct	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	433.3	Multiple and bilateral [433.3]	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	433.30	Ocl mlt bi art wo infrct	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	433.31	Ocl mlt bi art w infrct	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	433.80	Ocl spcf art wo infrct	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	433.8	Other specified precerebral artery [433.8]	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	433.81	Ocl spcf art w infrct	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	433.90	Ocl art NOS wo infrct	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	433.9	Unspecified precerebral artery [433.9]	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	433.91	Ocl art NOS w infrct	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	434.0	Cerebral thrombosis [434.0]	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	434.00	Crbl thrbms wo infrct	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	434	Occlusion of cerebral arteries [434]	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	434.01	Crbl thrbms w infrct	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	434.1	Cerebral embolism [434.1]	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	434.10	Crbl embism wo infrct	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	434.11	Crbl embism w infrct	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	434.9	Cerebral artery occlusion, unspecified [434.9]	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	434.90	Crbl art oc NOS wo infrct	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	434.91	Crbl art ocl NOS w infrct	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	440.1	Renal artery atheroscler	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	440.20	Athscld extrm ntv art NOS	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	440.2	Of native arteries of the extremities [440.2]	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	440.21	Ath ext ntv at w claudct	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	440.22	Ath ext ntv at w rst pn	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	440.23	Ath ext ntv art ulcrctn	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	440.24	Ath ext ntv art gngrene	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	440.29	Athrsc extrm ntv art oth	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	440.4	Chr tot occl art extrem	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	444	Arterial embolism and thrombosis [444]	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	444.0	Of abdominal aorta [444.0]	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	444.01	Saddle embolus abd aorta	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	444.09	Ot art emb/thrm abd aort	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	444.1	Thoracic aortic embolism	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	444.2	Of arteries of the extremities [444.2]	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	444.21	Upper extremity embolism	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	444.22	Lower extremity embolism	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	444.8	Of other specified artery [444.8]	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	444.81	Iliac artery embolism	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	444.89	Arterial embolism NEC	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	444.9	Arterial embolism NOS	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	445	Atheroembolism [445]	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	445.0	Of extremities [445.0]	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	445.01	Atheroembolism, upper ext	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	445.02	Atheroembolism, lower ext	ICD9CM

IVD	2.16.840.1.113883.3.464.1004.1137	445.8	Of other sites [445.8]	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	445.81	Atheroembolism, kidney	ICD9CM
IVD	2.16.840.1.113883.3.464.1004.1137	445.89	Atheroembolism, site NEC	ICD9CM
Outpatient	2.16.840.1.113883.3.464.1004.1202	99201		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99202		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99203		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99204		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99205		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99211		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99212		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99213		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99214		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99215		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99241		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99242		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99243		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99244		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99245		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99341		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99342		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99343		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99344		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99345		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99347		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99348		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99349		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99350		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99381		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99382		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99383		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99384		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99385		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99386		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99387		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99391		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99392		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99393		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99394		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99395		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99396		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99397		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99401		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99402		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99403		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99404		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99411		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99412		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99420		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99429		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99455		CPT
Outpatient	2.16.840.1.113883.3.464.1004.1202	99456		CPT
			INITIAL PREVENTIVE PHYSICAL EXAMINATION; FACE-TO-FACE VISIT, SERVICES LIMITED TO NEW BENEFICIARY DURING THE FIRST 12 MONTHS OF MEDICARE ENROLLMENT [G0402]	HCPCS
Outpatient	2.16.840.1.113883.3.464.1004.1202	G0402		
			ANNUAL WELLNESS VISIT; INCLUDES A PERSONALIZED PREVENTION PLAN OF SERVICE (PPS), INITIAL VISIT [G0438]	HCPCS
Outpatient	2.16.840.1.113883.3.464.1004.1202	G0438		
			ANNUAL WELLNESS VISIT, INCLUDES A PERSONALIZED PREVENTION PLAN OF SERVICE (PPS), SUBSEQUENT VISIT [G0439]	HCPCS
Outpatient	2.16.840.1.113883.3.464.1004.1202	G0439		
Outpatient	2.16.840.1.113883.3.464.1004.1202	0510	General	UBREV
Outpatient	2.16.840.1.113883.3.464.1004.1202	0511	Chronic pain center	UBREV
Outpatient	2.16.840.1.113883.3.464.1004.1202	0512	Dental clinic	UBREV
Outpatient	2.16.840.1.113883.3.464.1004.1202	0513	Psychiatric clinic	UBREV
Outpatient	2.16.840.1.113883.3.464.1004.1202	0514	OB/GYN clinic	UBREV
Outpatient	2.16.840.1.113883.3.464.1004.1202	0515	Pediatric clinic	UBREV
Outpatient	2.16.840.1.113883.3.464.1004.1202	0516	Urgent care clinic	UBREV
Outpatient	2.16.840.1.113883.3.464.1004.1202	0517	Family practice clinic	UBREV

Outpatient	2.16.840.1.113883.3.464.1004.1202	0519	Other clinic	UBREV
Outpatient	2.16.840.1.113883.3.464.1004.1202	0520	General	UBREV
Outpatient	2.16.840.1.113883.3.464.1004.1202	0521	Clinic visit by member to RHC/FQHC	UBREV
Outpatient	2.16.840.1.113883.3.464.1004.1202	0522	Home visit by RHC/FQHC practitioner	UBREV
Outpatient	2.16.840.1.113883.3.464.1004.1202	0523	Family practice clinic	UBREV
Outpatient	2.16.840.1.113883.3.464.1004.1202	0526	Urgent care clinic	UBREV
			Visit nurse service to a member's home in a home health shortage area	
Outpatient	2.16.840.1.113883.3.464.1004.1202	0527	Visit by RHC/FQHC practitioner to other non-RHC/FQHC site (e.g., scene of accident)	UBREV
Outpatient	2.16.840.1.113883.3.464.1004.1202	0528	Other freestanding clinic	UBREV
Outpatient	2.16.840.1.113883.3.464.1004.1202	0529	Outpatient services	UBREV
Outpatient	2.16.840.1.113883.3.464.1004.1202	0982	Clinic	UBREV
PCI	2.16.840.1.113883.3.464.1004.1204	92920		CPT
PCI	2.16.840.1.113883.3.464.1004.1204	92924		CPT
PCI	2.16.840.1.113883.3.464.1004.1204	92928		CPT
PCI	2.16.840.1.113883.3.464.1004.1204	92933		CPT
PCI	2.16.840.1.113883.3.464.1004.1204	92937		CPT
PCI	2.16.840.1.113883.3.464.1004.1204	92941		CPT
PCI	2.16.840.1.113883.3.464.1004.1204	92943		CPT
PCI	2.16.840.1.113883.3.464.1004.1204	92980		CPT
PCI	2.16.840.1.113883.3.464.1004.1204	92982		CPT
PCI	2.16.840.1.113883.3.464.1004.1204	92995		CPT
			TRANSCATHETER PLACEMENT OF A DRUG ELUTING INTRACORONARY STENT(S), PERCUTANEOUS, WITH OR WITHOUT OTHER THERAPEUTIC INTERVENTION, ANY METHOD;	
PCI	2.16.840.1.113883.3.464.1004.1204	G0290	SINGLE VESSEL [G0290]	HCPCS
PCI	2.16.840.1.113883.3.464.1004.1204	00.66	PTCA	ICD9PCS
PCI	2.16.840.1.113883.3.464.1004.1204	36.06	Ins nondrug elut cor st	ICD9PCS
PCI	2.16.840.1.113883.3.464.1004.1204	36.07	Ins drug-elut coronry st	ICD9PCS