

TAR and Non-Benefit List: Codes 40000 thru 49999

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«Medi-Cal has not activated all CPT® Category I or Proprietary Laboratory Analysis (PLA) codes associated with various covered Medi-Cal benefits and services. In these instances, the CPT Category I or PLA codes are classified a “non-benefit” for Medi-Cal and in deny status for the general Medi-Cal population. However, Medi-Cal may provide reimbursement for a CPT code Category I or PLA code with an approved *Treatment Authorization Request* (TAR) if medical necessity is established. Billing codes in non-benefit status should be evaluated and coverage decided on a case-by-case basis for individual Medi-Cal members based upon medical necessity.»

Surgery

Digestive System

Note: Refer to the *TAR and Non-Benefit: Introduction to List* in this manual for more information about the categories of benefit restrictions.

Lips

Excision

Code	Description	Benefit Restrictions
40490	Biopsy of lip	Assistant Surgeon services not payable

Other Procedures

Code	Description	Benefit Restrictions
40799	Unlisted procedure, lips	Requires TAR, Primary Surgeon/ Provider

Vestibule of Mouth

Incision

Code	Description	Benefit Restrictions
40800	Drainage of abscess/cyst, mouth, simple	Assistant Surgeon services not payable
40801	Drainage of abscess/cyst, mouth, complicated	Assistant Surgeon services not payable
40804	Removal of embedded foreign body, mouth, simple	Assistant Surgeon services not payable
40805	Removal of embedded foreign body, mouth, complicated	Assistant Surgeon services not payable
40806	Incision labial frenum	Non-Benefit

Excision

Code	Description	Benefit Restrictions
40808	Biopsy, vestibule of mouth	Assistant Surgeon services not payable
40810	Excision of lesion mucosa/submucosa, mouth, without repair	Non-Benefit
40812	Excision of lesion mucosa/submucosa, mouth, simple repair	Assistant Surgeon services not payable
40816	Excision of lesion, mouth, mucosa/submucosa, complex	Assistant Surgeon services not payable
40819	Excision of frenum, labial or buccal	Assistant Surgeon services not payable
40820	Destruction of lesion/scar by physical methods	Assistant Surgeon services not payable

Repair

Code	Description	Benefit Restrictions
40830	Closure of laceration, vestibule of mouth, 2.5 cm or less	Assistant Surgeon services not payable

Other Procedures

Code	Description	Benefit Restrictions
40899	Unlisted procedure, vestibule of mouth	Requires TAR, Primary Surgeon/ Provider

Tongue, Floor of Mouth**Incision**

Code	Description	Benefit Restrictions
41000	Intraoral incision and drainage of abscess; lingual	Assistant Surgeon services not payable
41005	Intraoral incision and drainage of abscess; sublingual, superficial	Assistant Surgeon services not payable
41007	Intraoral incision and drainage of abscess; submental space	Assistant Surgeon services not payable

Incision (continued)

Code	Description	Benefit Restrictions
41008	Intraoral incision and drainage of abscess; submandibular space	Assistant Surgeon services not payable
41009	Intraoral incision and drainage of abscess; masticator space	Assistant Surgeon services not payable
41010	Incision lingual frenum	Assistant Surgeon services not payable
41016	Extraoral incision and drainage of abscess; submental	Assistant Surgeon services not payable
41017	Extraoral incision and drainage of abscess; submandibular	Assistant Surgeon services not payable
41018	Extraoral incision and drainage of abscess; masticator space	Assistant Surgeon services not payable

Excision

Code	Description	Benefit Restrictions
41100	Biopsy of tongue, anterior two-thirds	Assistant Surgeon services not payable
41105	Biopsy of tongue, posterior one-third	Assistant Surgeon services not payable
41108	Biopsy of floor of mouth	Assistant Surgeon services not payable
41115	Excision of lingual frenum	Non-Benefit
41116	Excision, lesion of floor of mouth	Assistant Surgeon services not payable

Repair

Code	Description	Benefit Restrictions
41250	Repair of laceration, 2.5 cm or less; floor of mouth and/or anterior two-thirds of tongue	Assistant Surgeon services not payable
41251	Repair of laceration, 2.5 cm or less, posterior one-third of tongue	Assistant Surgeon services not payable

Other Procedures

Code	Description	Benefit Restrictions
41510	Suture of tongue to lip for micrognathia	Requires TAR, Primary Surgeon/ Provider
41520	Frenoplasty	Assistant Surgeon services not payable
41530	Submucosal ablation tongue base	Assistant Surgeon services not payable
41599	Unlisted procedure, tongue, floor of mouth	Requires TAR, Primary Surgeon/ Provider

Dentoalveolar Structures**Incision**

Code	Description	Benefit Restrictions
41800	Drainage of abscess from dentoalveolar structures	Assistant Surgeon services not payable

Excision, Destruction

Code	Description	Benefit Restrictions
41820	Gingivectomy, each quadrant	Assistant Surgeon services not payable
41821	Operculectomy, excision pericoronal tissues	Assistant Surgeon services not payable
41822	Excision of fibrous tuberosities, dentoalveolar structures	Assistant Surgeon services not payable
41823	Excision of osseous tuberosities, dentoalveolar structures	Assistant Surgeon services not payable
41825	Excision of lesion, dentoalveolar structures; without repair	Assistant Surgeon services not payable
41826	Excision of lesion, dentoalveolar structures; with simple repair	Assistant Surgeon services not payable
41828	Excision of hyperplastic alveolar mucosa, each quadrant (specify)	Assistant Surgeon services not payable
41830	Alveolectomy, including curettage of osteitis or sequestrectomy	Assistant Surgeon services not payable

Other Procedures

Code	Description	Benefit Restrictions
41870	Peridental mucosal grafting	Assistant Surgeon services not payable
41872	Gingivoplasty, each quadrant (specify)	Assistant Surgeon services not payable
41874	Alveoplasty, each quadrant (specify)	Assistant Surgeon services not payable
41899	Unlisted procedure, dentoalveolar structures	Requires TAR, Primary Surgeon/ Provider

Palate Uvula**Incision**

Code	Description	Benefit Restrictions
42000	Drainage of abscess of palate, uvula	Assistant Surgeon services not payable

Excision, Destruction

Code	Description	Benefit Restrictions
42100	Biopsy of palate, uvula	Assistant Surgeon services not payable
42140	Uvulectomy, excision of uvula	Requires TAR, Primary Surgeon/ Provider; Assistant Surgeon services not payable
42145	Palatopharyngoplasty	Requires TAR, Primary Surgeon/ Provider
42160	Destruction of lesion, palate or uvula	Assistant Surgeon services not payable

Incision

Code	Description	Benefit Restrictions
42299	Unlisted procedure, palate, uvula	Requires TAR, Primary Surgeon/ Provider

Salivary Glands and Ducts**Incision**

Code	Description	Benefit Restrictions
42300	Drainage of abscess; parotid, simple	Assistant Surgeon services not payable
42310	Drainage of abscess; submaxillary or sublingual, intraoral	Assistant Surgeon services not payable
42320	Drainage of abscess; submaxillary, external	Assistant Surgeon services not payable
42330	Sialolithotomy; submandibular, uncomplicated	Assistant Surgeon services not payable
42335	Sialolithotomy; submandibular, complicated	Assistant Surgeon services not payable

Excision

Code	Description	Benefit Restrictions
42400	Biopsy of salivary gland, needle	Assistant Surgeon services not payable
42405	Biopsy of salivary gland, incisional	Assistant Surgeon services not payable

Other Procedures

Code	Description	Benefit Restrictions
42550	Injection procedure for sialography	Assistant Surgeon services not payable
42650	Dilation salivary duct	Assistant Surgeon services not payable
42660	Dilation and catheterization of salivary duct	Assistant Surgeon services not payable
42699	Unlisted procedure, salivary glands or ducts	Requires TAR, Primary Surgeon/ Provider

Pharynx, Adenoids, and Tonsils**Incision**

Code	Description	Benefit Restrictions
42700	Incision and drainage abscess; peritonsillar	Assistant Surgeon services not payable
42720	Incision and drainage abscess; retropharyngeal or parapharyngeal, intraoral approach	Assistant Surgeon services not payable

Excision, Destruction

Code	Description	Benefit Restrictions
42800	Biopsy; oropharynx	Assistant Surgeon services not payable
42804	Biopsy, nasopharynx, visible lesion, simple	Assistant Surgeon services not payable
42809	Removal of foreign body from pharynx	Assistant Surgeon services not payable
42810	Excision branchial cleft cyst/vestige, in skin	Requires TAR, Primary Surgeon/ Provider; Assistant Surgeon services not payable
42815	Excision branchial cleft cyst, beneath subcutaneous tissues	Requires TAR, Primary Surgeon/ Provider; Assistant Surgeon services not payable
42820	Tonsillectomy/adenoidectomy; under 12 years	Requires TAR, Primary Surgeon/ Provider; Assistant Surgeon services not payable
42821	Tonsillectomy/adenoidectomy; 12 years and over	Requires TAR, Primary Surgeon/ Provider; Assistant Surgeon services not payable

Excision, Destruction (continued)

Code	Description	Benefit Restrictions
42825	Tonsillectomy, primary or secondary; under 12 years	Requires TAR, Primary Surgeon/ Provider; Assistant Surgeon services not payable
42826	Tonsillectomy; 12 years and over	Requires TAR, Primary Surgeon/ Provider; Assistant Surgeon services not payable
42830	Adenoidectomy, primary; under 12 years	Requires TAR, Primary Surgeon/ Provider; Assistant Surgeon services not payable
42831	Adenoidectomy, primary; 12 years and over	Requires TAR, Primary Surgeon/ Provider; Assistant Surgeon services not payable
42835	Adenoidectomy, secondary; under 12 years	Requires TAR, Primary Surgeon/ Provider; Assistant Surgeon services not payable
42860	Excision tonsil tags	Requires TAR, Primary Surgeon/ Provider; Assistant Surgeon services not payable
42870	Excision or destruction lingual tonsil	Requires TAR, Primary Surgeon/ Provider; Assistant Surgeon services not payable

Excision, Destruction (continued)

Code	Description	Benefit Restrictions
42960	Control oropharyngeal hemorrhage; simple	Assistant Surgeon services not payable
42962	Control oropharyngeal hemorrhage; with surgical intervention	Assistant Surgeon services not payable
42970	Control of nasopharyngeal hemorrhage, primary or secondary; simple	Assistant Surgeon services not payable
42972	Control of nasopharyngeal hemorrhage, primary or secondary; with secondary surgical intervention	Assistant Surgeon services not payable

Other Procedures

Code	Description	Benefit Restrictions
42999	Unlisted procedure, pharynx, adenoids or tonsils	Requires TAR, Primary Surgeon/ Provider

Esophagus**«Endoscopy, Sleep»**

Code	Description	Benefit Restrictions
«42975	Drug-induced sleep endoscopy, with dynamic evaluation of velum, pharynx, tongue base, and larynx for evaluation of sleep-disordered breathing, flexible, diagnostic	Assistant Surgeon services not payable»

Endoscopy, Esophagoscopy

Code	Description	Benefit Restrictions
43180	Esophagoscopy, rigid, transoral with diverticulectomy of hypopharynx or cervical esophagus with cricopharyngeal myotomy	Assistant Surgeon services not payable
43191	Esophagoscopy, rigid, transoral; diagnostic	Assistant Surgeon services not payable
43192	Esophagoscopy, rigid, transoral; with directed submucosal injection(s), any substance	Assistant Surgeon services not payable
43193	Esophagoscopy, rigid, transoral; with biopsy, single or multiple	Assistant Surgeon services not payable
43194	Esophagoscopy, rigid, transoral; with removal of foreign body(s)	Assistant Surgeon services not payable
43195	Esophagoscopy, rigid, transoral; with balloon dilation	Assistant Surgeon services not payable

Endoscopy, Esophagoscopy

Code	Description	Benefit Restrictions
43196	Esophagoscopy, rigid, transoral; with insertion of guide wire followed by dilation over guide wire	Assistant Surgeon services not payable
43197	Esophagoscopy, flexible, transnasal; diagnostic	Assistant Surgeon services not payable
43198	Esophagoscopy, flexible, transnasal; with biopsy, single or multiple	Assistant Surgeon services not payable
43200	Esophagoscopy, flexible, transoral; diagnostic	Assistant Surgeon services not payable
43201	Esophagoscopy, flexible, transoral; with directed submucosal injection(s), any substance	Assistant Surgeon services not payable
43202	Esophagoscopy, flexible, transoral; with biopsy, single or multiple	Assistant Surgeon services not payable
43204	Esophagoscopy, flexible, transoral; with injection sclerosis of esophageal varices	Assistant Surgeon services not payable
43205	Esophagoscopy, flexible, transoral; with band ligation of esophageal varices	Assistant Surgeon services not payable
43206	Esophagoscopy, flexible, transoral; with optical endomicroscopy	Assistant Surgeon services not payable
43210	Esophagogastroduodenoscopy, flexible, transoral; with esophagogastric fundoplasty, partial or complete	Assistant Surgeon services not payable
43211	Esophagoscopy, flexible, transoral; with endoscopic mucosal resection	Assistant Surgeon services not payable
43212	Esophagoscopy, flexible, transoral; with placement of endoscopic stent	Assistant Surgeon services not payable
43213	Esophagoscopy, flexible, transoral; with dilation of esophagus, by balloon or dilator, retrograde	Assistant Surgeon services not payable
43214	Esophagoscopy, flexible, transoral; with dilation of esophagus with balloon	Assistant Surgeon services not payable
43215	Esophagoscopy, flexible, transoral; with removal foreign body(s)	Assistant Surgeon services not payable
43216	Esophagoscopy, flexible, transoral; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery	Assistant Surgeon services not payable
43217	Esophagoscopy, flexible, transoral; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	Assistant Surgeon services not payable
43220	Esophagoscopy, flexible, transoral; with transendoscopic balloon dilation	Assistant Surgeon services not payable

Endoscopy, Esophagoscopy (continued)

Code	Description	Benefit Restrictions
43226	Esophagoscopy, flexible, transoral; with insertion of guide wire followed by passage of dilator(s) over guide wire	Assistant Surgeon services not payable
43227	Esophagoscopy, flexible, transoral; with control of bleeding, any method	Assistant Surgeon services not payable
43229	Esophagoscopy, flexible, transoral; with ablation of tumor(s), polyp(s), or other lesion(s)	Assistant Surgeon services not payable
43231	Esophagoscopy, flexible, transoral; with endoscopic ultrasound examination	Assistant Surgeon services not payable
43232	Esophagoscopy, flexible, transoral; with transendoscopic ultrasound- guided intramural or transmural fine needle aspiration/biopsy(s)	Assistant Surgeon services not payable

Endoscopy, Esophagogastroduodenoscopy

Code	Description	Benefit Restrictions
43233	Esophagogastroduodenoscopy, flexible, transoral; with dilation of esophagus with balloon	Assistant Surgeon services not payable
43235	Esophagogastroduodenoscopy, flexible, transoral; diagnostic	Assistant Surgeon services not payable
43236	Esophagogastroduodenoscopy, flexible, transoral; with directed submucosal injection(s), any substance	Assistant Surgeon services not payable
43237	Esophagogastroduodenoscopy, flexible, transoral; with endoscopic ultrasound examination, limited to esophagus, stomach or duodenum	Assistant Surgeon services not payable
43238	Esophagogastroduodenoscopy, flexible, transoral; with transendoscopic ultrasound-guided intramural or transmural fine needle aspiration/biopsy(s), esophagus	Non-Benefit
43239	Esophagogastroduodenoscopy, flexible, transoral; with biopsy, single or multiple	Assistant Surgeon services not payable
43240	Esophagogastroduodenoscopy, flexible, transoral; with transmural drainage of pseudocyst	Assistant Surgeon services not payable
43241	Esophagogastroduodenoscopy, flexible, transoral; with insertion of intraluminal tube or catheter	Assistant Surgeon services not payable

Endoscopy, Esophagogastroduodenoscopy (continued)

Code	Description	Benefit Restrictions
43242	Esophagogastroduodenoscopy, flexible, transoral; with transendoscopic ultrasound-guided intramural or transmural fine needle aspiration/biopsy(s)	Assistant Surgeon services not payable
43243	Esophagogastroduodenoscopy, flexible, transoral; with injection sclerosis of esophageal/gastric varices	Assistant Surgeon services not payable
43244	Esophagogastroduodenoscopy, flexible, transoral; with band ligation of esophageal/gastric varices	Assistant Surgeon services not payable
43245	Esophagogastroduodenoscopy, flexible, transoral; with dilation of gastric duodenal stricture(s)	Assistant Surgeon services not payable
43246	Esophagogastroduodenoscopy, flexible, transoral; with directed placement of percutaneous gastrostomy tube	Assistant Surgeon services not payable
43248	Esophagogastroduodenoscopy, flexible, transoral; with insertion of guide wire followed by passage of dilator(s) through esophagus over guide wire	Assistant Surgeon services not payable
43250	Esophagogastroduodenoscopy, flexible, transoral; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery	Assistant Surgeon services not payable
43251	Esophagogastroduodenoscopy, flexible, transoral; with removal of tumor(s), polyp(s), or other lesion(s), by snare technique	Assistant Surgeon services not payable
43252	Esophagogastroduodenoscopy, flexible, transoral; with optical endomicroscopy	Assistant Surgeon services not payable
43253	Esophagogastroduodenoscopy, flexible, transoral; with transendoscopic ultrasound-guided transmural injection of diagnostic or therapeutic substance(s) or fiducial marker	Assistant Surgeon services not payable
43254	Esophagogastroduodenoscopy, flexible, transoral; with endoscopic mucosal resection	Assistant Surgeon services not payable
43259	Esophagogastroduodenoscopy, flexible, transoral; with endoscopic ultrasound examination of esophagus, stomach and duodenum, or surgically altered stomach	Assistant Surgeon services not payable

Endoscopic Retrograde Cholangiopancreatography (ERCP)

Code	Description	Benefit Restrictions
43261	ERCP; diagnostic; with biopsy	Assistant Surgeon services not payable
43262	ERCP; with sphincterotomy/papillotomy	Assistant Surgeon services not payable
43263	ERCP; with pressure measurement of sphincter of Oddi	Assistant Surgeon services not payable
43264	ERCP; with removal of calculi/debris from biliary/pancreatic duct(s)	Assistant Surgeon services not payable
43265	ERCP; with destruction of calculi, any method	Non-Benefit
43266	Esophagogastroduodenoscopy, flexible, transoral; with placement of endoscopic stent	Assistant Surgeon services not payable
43270	Esophagogastroduodenoscopy, flexible, transoral; with ablation of tumor(s), polyp(s), or other lesion(s)	Assistant Surgeon services not payable
43273	ERCP; with cannulation of papilla	Assistant Surgeon services not payable
43274	ERCP; with placement of endoscopic stent into biliary or pancreatic duct, each stent	Assistant Surgeon services not payable
43275	ERCP; with removal of foreign body(s) or stent(s) from biliary/pancreatic duct(s)	Assistant Surgeon services not payable
43276	ERCP; with removal and exchange of stent(s), biliary or pancreatic duct, each stent exchanged	Assistant Surgeon services not payable
43277	ERCP; with trans-endoscopic balloon dilation of biliary/pancreatic duct(s) or of ampulla, each duct	Assistant Surgeon services not payable
43278	ERCP; with ablation of tumor(s), polyp(s), or other lesion(s)	Assistant Surgeon services not payable
«43290	Esophagogastroduodenoscopy, flexible, transoral; with deployment of intragastric bariatric balloon	Assistant Surgeon services not payable»
«43291	Esophagogastroduodenoscopy, flexible, transoral; with removal of intragastric bariatric balloon(s)	Assistant Surgeon services not payable»

Laparoscopy

Code	Description	Benefit Restrictions
43289	Unlisted laparoscopy procedure, esophagus	Requires TAR, Primary Surgeon/ Provider

Repair

Code	Description	Benefit Restrictions
43325	Esophagogastric fundoplasty; with fundic path (Thal-Nissen procedure)	Assistant Surgeon services not payable

Manipulation

Code	Description	Benefit Restrictions
43450	Dilation of esophagus by unguided sound or bougie	Assistant Surgeon services not payable
43453	Dilation of esophagus over guide wire	Assistant Surgeon services not payable
43460	Esophagogastric tamponade, with balloon	Assistant Surgeon services not payable
43497	Lower esophageal myotomy, transoral (ie, peroral endoscopic myotomy [POEM])	Assistant Surgeon services not payable
43499	Unlisted procedure, esophagus	Requires TAR, Primary Surgeon/ Provider

Stomach**Laparoscopy**

Code	Description	Benefit Restrictions
43644	Gastric bypass/Roux-en-Y	Requires TAR, Primary Surgeon/ Provider
43645	Gastric bypass, includes small intestine reconstruction	Requires TAR, Primary Surgeon/ Provider
43647	Laparoscopy, surgical; implantation or replacement of gastric neurostimulator electrodes antrum	Non-Benefit
43648	Laparoscopy, surgical; revision or removal of gastric neurostimulator electrodes, antrum	Non-Benefit
43659	Unlisted laparoscopy procedure, stomach	Requires TAR, Primary Surgeon/ Provider

Introduction (continued)

Code	Description	Benefit Restrictions
43752	Naso- or oro-gastric tube placement, necessitating physician's skill and fluoroscopic guidance	Assistant Surgeon services not payable
43761	Repositioning of gastric feeding tube, any method, through the duodenum for enteric nutrition	Assistant Surgeon services not payable
43770	Laparoscopy, surgical, gastric restrictive procedure, placement of adjustable gastric band	Requires TAR, Primary Surgeon/ Provider
43771	Revision of adjustable gastric band	Requires TAR, Primary Surgeon/ Provider
43772	Removal of adjustable gastric band	Requires TAR, Primary Surgeon/ Provider
43773	Removal and replacement of adjustable gastric band	Requires TAR, Primary Surgeon/ Provider
43774	Removal of adjustable gastric band and subcutaneous port	Requires TAR, Primary Surgeon/ Provider
43775	Longitudinal gastrectomy	Requires TAR, Primary Surgeon/ Provider

Other Procedures

Code	Description	Benefit Restrictions
43842	Gastric restrictive procedure, without gastric bypass, for morbid obesity; vertical-banded gastroplasty	Requires TAR, Primary Surgeon/ Provider
43843	Gastric restrictive procedure, without gastric bypass, for morbid obesity; other than vertical-banded gastroplasty	Requires TAR, Primary Surgeon/ Provider
43845	Gastric restrictive procedure, biliopancreatic diversion with duodenal switch	Requires TAR, Primary Surgeon/ Provider

Other Procedures (continued)

Code	Description	Benefit Restrictions
43846	Gastric restrictive procedure, with gastric bypass, for morbid obesity; with short limb Roux-en-Y gastroenterostomy	Requires TAR, Primary Surgeon/ Provider
43847	Gastric restrictive procedure, with gastric bypass, for morbid obesity; with small intestine reconstruction to limit absorption	Requires TAR, Primary Surgeon/ Provider
43848	Revision, open, of gastric restrictive procedure for morbid obesity	Requires TAR, Primary Surgeon/ Provider
43881	Implantation or replacement of gastric neurostimulator electrodes, antrum, open	Non-Benefit
43882	Revision or removal of gastric neurostimulator electrodes, antrum, open	Non-Benefit
43886	Gastric restrictive procedure, open; revision of subcutaneous port	Requires TAR, Primary Surgeon/ Provider
43887	Removal of subcutaneous port	Requires TAR, Primary Surgeon/ Provider
43888	Removal and replacement of subcutaneous port	Requires TAR, Primary Surgeon/ Provider
43999	Unlisted procedure, stomach	Requires TAR, Primary Surgeon/ Provider

Intestines (Except Rectum)**Excision**

Code	Description	Benefit Restrictions
44100	Biopsy intestine, peroral	Assistant Surgeon services not payable
44132	Donor enterectomy, open; from cadaver donor	Non-Benefit
44133	Donor enterectomy, open; partial, from living donor	Non-Benefit
44135	Intestinal allotransplantation; from cadaver donor	Requires TAR, Primary Surgeon/ Provider
44136	Intestinal allotransplantation; from living donor	Non-Benefit
44137	Removal of transplanted intestinal allograft	Non-Benefit

Laparoscopy, Other Procedures

Code	Description	Benefit Restrictions
44238	Unlisted laparoscopy procedure, intestine (except rectum)	Requires TAR, Primary Surgeon/ Provider

Enterostomy, External Fistulization of Intestines

Code	Description	Benefit Restrictions
44340	Revision of colostomy; simple	Assistant Surgeon services not payable

Endoscopy, Small Intestine and Stomal

Code	Description	Benefit Restrictions
44360	Small intestinal endoscopy, diagnostic	Assistant Surgeon services not payable
44361	Small intestinal endoscopy; with biopsy	Assistant Surgeon services not payable
44363	Small intestinal endoscopy; with removal of foreign body(s)	Assistant Surgeon services not payable
44364	Small intestinal endoscopy; with removal of lesion(s) by snare	Assistant Surgeon services not payable
44365	Small intestinal endoscopy; with removal of lesion(s) by forceps or cautery	Assistant Surgeon services not payable
44366	Small intestinal endoscopy; with control of bleeding	Assistant Surgeon services not payable
44369	Small intestinal endoscopy; with ablation of lesion(s)	Assistant Surgeon services not payable
44370	Small intestinal endoscopy; with transendoscopic stent placement (includes predilation)	Assistant Surgeon services not payable
44372	Small intestinal endoscopy; percutaneous jejunostomy tube	Assistant Surgeon services not payable
44373	Small intestinal endoscopy; gastrostomy to jejunostomy tube	Assistant Surgeon services not payable
44376	Small intestinal endoscopy, including ileum; diagnostic	Assistant Surgeon services not payable
44377	Small intestinal endoscopy, including ileum; with biopsy	Assistant Surgeon services not payable
44378	Small intestinal endoscopy, including ileum; with control of bleeding	Assistant Surgeon services not payable
44379	Small intestinal endoscopy; with transendoscopic stent placement (includes predilation)	Assistant Surgeon services not payable

Endoscopy, Stomal

Code	Description	Benefit Restrictions
44380	Ileoscopy, through stoma; diagnostic, including collection of specimen(s) by brushing or washing	Assistant Surgeon services not payable
44381	Ileoscopy, through stoma; with transendoscopic balloon dilation	Assistant Surgeon services not payable
44382	Ileoscopy, through stoma; with biopsy, single or multiple	Assistant Surgeon services not payable
44384	Ileoscopy, through stoma; with placement of endoscopic stent	Assistant Surgeon services not payable
44385	Endoscopic evaluation small intestine pouch; diagnostic	Assistant Surgeon services not payable
44386	Endoscopic evaluation of small intestinal pouch; with biopsy, single or multiple	Assistant Surgeon services not payable
44388	Colonoscopy through stoma; diagnostic, including collection of specimen(s) by brushing or washing	Assistant Surgeon services not payable
44389	Colonoscopy through stoma; with biopsy, single or multiple	Assistant Surgeon services not payable
44390	Colonoscopy through stoma; with removal of foreign body(s)	Assistant Surgeon services not payable
44391	Colonoscopy through stoma; with control of bleeding, any method	Assistant Surgeon services not payable
44392	Colonoscopy through stoma; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps	Assistant Surgeon services not payable
44394	Colonoscopy through stoma; removal of lesion(s) by snare	Assistant Surgeon services not payable
44401	Colonoscopy through stoma; with ablation of tumor(s), polyp(s), or other lesion(s)	Assistant Surgeon services not payable
44402	Colonoscopy through stoma; with endoscopic stent placement	Assistant Surgeon services not payable
44403	Colonoscopy through stoma; with endoscopic mucosal resection	Assistant Surgeon services not payable
44404	Colonoscopy through stoma; with directed submucosal injection(s), any substance	Assistant Surgeon services not payable
44405	Colonoscopy through stoma; with transendoscopic balloon dilation	Assistant Surgeon services not payable

Endoscopy, Stomal (continued)

Code	Description	Benefit Restrictions
44406	Colonoscopy through stoma; with endoscopic ultrasound examination	Assistant Surgeon services not payable
44407	Colonoscopy through stoma; with transendoscopic ultrasound guided intramural or transmural fine needle aspiration/biopsy(s)	Assistant Surgeon services not payable
44408	Colonoscopy through stoma; with decompression, including placement of decompression tube	Assistant Surgeon services not payable

Introduction

Code	Description	Benefit Restrictions
44500	Long gastrointestinal tube introduction	Assistant Surgeon services not payable

Other Procedures

Code	Description	Benefit Restrictions
44705	Preparation of fecal microbiota for instillation, including assessment of donor specimen	Assistant Surgeon services not payable
44715	Preparation of donor intestine prior to transplantation	Non-Benefit
44720	Reconstruction of donor intestine allograft prior to transplantation; venous	Non-Benefit
44721	Reconstruction of cadaver or living donor intestine allograft prior to transplantation; arterial	Non-Benefit
44799	Unlisted procedure, small intestine	Requires TAR, Primary Surgeon/ Provider

Meckel's Diverticulum and the Mesentery**Other Procedures**

Code	Description	Benefit Restrictions
44899	Unlisted procedure, Meckel's diverticulum and mesentery	Requires TAR, Primary Surgeon/ Provider

Appendix**Laparoscopy**

Code	Description	Benefit Restrictions
44979	Unlisted laparoscopy procedure, appendix	Requires TAR, Primary Surgeon/ Provider

Colon and Rectum**Incision**

Code	Description	Benefit Restrictions
45005	Incision and drainage of submucosal abscess, rectum	Assistant Surgeon services not payable

Excision

Code	Description	Benefit Restrictions
45100	Biopsy anorectal wall, anal approach	Assistant Surgeon services not payable

Endoscopy

Code	Description	Benefit Restrictions
45300	Proctosigmoidoscopy, rigid; diagnostic	Assistant Surgeon services not payable
45303	Proctosigmoidoscopy, rigid; with dilation	Assistant Surgeon services not payable
45305	Proctosigmoidoscopy, rigid; with biopsy	Assistant Surgeon services not payable
45307	Proctosigmoidoscopy, rigid; foreign body removal	Assistant Surgeon services not payable
45308	Proctosigmoidoscopy, rigid; single lesion removal by forceps or cautery	Assistant Surgeon services not payable
45309	Proctosigmoidoscopy, rigid; single lesion removal by snare	Assistant Surgeon services not payable
45315	Proctosigmoidoscopy, rigid; multiple lesion removal, by forceps, cautery or snare	Assistant Surgeon services not payable
45320	Proctosigmoidoscopy, rigid; with ablation of lesion(s)	Assistant Surgeon services not payable

Endoscopy (continued)

Code	Description	Benefit Restrictions
45321	Proctosigmoidoscopy, rigid; decompression of volvulus	Assistant Surgeon services not payable
45327	Proctosigmoidoscopy, rigid; with transendoscopic stent placement (includes predilation)	Assistant Surgeon services not payable
45330	Sigmoidoscopy, flexible; diagnostic	Assistant Surgeon services not payable
45331	Sigmoidoscopy, flexible; with biopsy	Assistant Surgeon services not payable
45332	Sigmoidoscopy, flexible; with removal of foreign body(s)	Assistant Surgeon services not payable
45333	Sigmoidoscopy, flexible; with removal of lesion(s) by forceps or cautery	Assistant Surgeon services not payable
45334	Sigmoidoscopy, flexible; with control of bleeding	Assistant Surgeon services not payable
45335	Sigmoidoscopy, flexible; with directed submucosal injection(s)	Assistant Surgeon services not payable
45337	Sigmoidoscopy, flexible; with decompression of volvulus	Assistant Surgeon services not payable
45338	Sigmoidoscopy, flexible; lesion removal, by snare	Assistant Surgeon services not payable
45340	Sigmoidoscopy, flexible; with dilation by balloon, one or more strictures	Assistant Surgeon services not payable
45341	Sigmoidoscopy, flexible; with endoscopic ultrasound examination	Assistant Surgeon services not payable
45342	Sigmoidoscopy, flexible; with transendoscopic ultrasound guided intramural or transmural fine aspiration/biopsy(s)	Assistant Surgeon services not payable
45346	Sigmoidoscopy, flexible; with ablation of tumor(s), polyp(s), or other lesion(s)	Assistant Surgeon services not payable
45347	Sigmoidoscopy, flexible; with placement of endoscopic stent	Assistant Surgeon services not payable
45349	Sigmoidoscopy, flexible; with endoscopic mucosal resection	Assistant Surgeon services not payable
45350	Sigmoidoscopy, flexible; with band ligation(s)	Assistant Surgeon services not payable

Endoscopy (continued)

Code	Description	Benefit Restrictions
45378	Colonoscopy, flexible; diagnostic	Assistant Surgeon services not payable
45379	Colonoscopy, flexible; with removal of foreign body(s)	Assistant Surgeon services not payable
45380	Colonoscopy, flexible; with biopsy	Assistant Surgeon services not payable
45381	Colonoscopy, flexible; with directed submucosal injection(s)	Assistant Surgeon services not payable
45382	Colonoscopy, flexible; with control of bleeding	Assistant Surgeon services not payable
45384	Colonoscopy, flexible; removal of lesion(s) by forceps or cautery	Assistant Surgeon services not payable
45385	Colonoscopy, flexible; removal of lesion(s), by snare	Assistant Surgeon services not payable
45386	Colonoscopy, flexible; with dilation by balloon, one or more strictures	Assistant Surgeon services not payable
45388	Colonoscopy, flexible; with ablation of tumor(s), polyp(s), or other lesion(s)	Assistant Surgeon services not payable
45389	Colonoscopy, flexible; with endoscopic stent placement	Assistant Surgeon services not payable
45390	Colonoscopy, flexible; with endoscopic mucosal resection	Assistant Surgeon services not payable
45391	Colonoscopy, flexible; with endoscopic ultrasound	Assistant Surgeon services not payable
45392	Colonoscopy, flexible; with transendoscopic ultrasound guided fine needle aspiration/biopsy(s)	Assistant Surgeon services not payable
45393	Colonoscopy, flexible; with decompression, including placement of decompression tube	Assistant Surgeon services not payable
45398	Colonoscopy, flexible; with band ligation(s)	Assistant Surgeon services not payable

Laparoscopy, Repair

Code	Description	Benefit Restrictions
45499	Unlisted laparoscopy procedure, rectum	Requires TAR, Primary Surgeon/ Provider

Repair

Code	Description	Benefit Restrictions
45505	Proctoplasty; for prolapse of mucous membrane	Requires TAR, Primary Surgeon/ Provider
45520	Perirectal injection sclerosing solution	Assistant Surgeon services not payable

Manipulation

Code	Description	Benefit Restrictions
45900	Reduction of procidentia under anesthesia	Assistant Surgeon services not payable
45905	Dilation of anal sphincter under anesthesia	Assistant Surgeon services not payable
45910	Dilation of rectal stricture under anesthesia	Assistant Surgeon services not payable
45915	Removal of fecal impaction or foreign body under anesthesia	Assistant Surgeon services not payable

«Other Procedures»

Code	Description	Benefit Restrictions
45999	Unlisted procedure, rectum	Requires TAR, Primary Surgeon/ Provider

Anus**Incision**

Code	Description	Benefit Restrictions
46020	Placement of seton	Assistant Surgeon services not payable
46030	Removal seton, other marker	Assistant Surgeon services not payable
46040	Incision and drainage of ischiorectal and/or perirectal abscess	Assistant Surgeon services not payable
46045	Incision and drainage of intramural, intramuscular, or submucosal abscess, transanal under anesthesia	Assistant Surgeon services not payable
46050	Incision and drainage of perianal abscess, superficial	Assistant Surgeon services not payable
46080	Sphincterotomy, anal, division of sphincter	Assistant Surgeon services not payable

Excision

Code	Description	Benefit Restrictions
46200	Fissurectomy, including sphincterotomy, when performed	Requires TAR, Primary Surgeon/ Provider
46220	Excision of single external papilla or tag, anus	Assistant Surgeon services not payable
46221	Hemorrhoidectomy, internal, by rubber band ligation(s)	Assistant Surgeon services not payable
46945	Hemorrhoidectomy, internal, by ligation other than rubber band; single hemorrhoid column/group	Assistant Surgeon services not payable
46946	Hemorrhoidectomy, internal, by ligation other than rubber band; 2 or more hemorrhoid columns/groups	Assistant Surgeon services not payable
46230	Excision of multiple papillae or tags, anus	Assistant Surgeon services not payable
46250	Hemorrhoidectomy, external, 2 or more columns/groups	Requires TAR, Primary Surgeon/ Provider; Assistant Surgeon services not payable

Excision (continued)

Code	Description	Benefit Restrictions
46255	Hemorrhoidectomy, internal and external, single column/group	Requires TAR, Primary Surgeon/ Provider
46257	Hemorrhoidectomy, internal and external, single column/group; with fissurectomy	Requires TAR, Primary Surgeon/ Provider
46258	Hemorrhoidectomy, internal and external, single column/group; with fistulectomy, including fissurectomy, when performed	Requires TAR, Primary Surgeon/ Provider
46260	Hemorrhoidectomy, internal and external, 2 or more columns/groups	Requires TAR, Primary Surgeon/ Provider
46261	Hemorrhoidectomy, internal and external, 2 or more columns/groups; with fissurectomy	Requires TAR, Primary Surgeon/ Provider
46262	Hemorrhoidectomy, internal and external, 2 or more columns/groups; with fistulectomy, including fissurectomy, when performed	Requires TAR, Primary Surgeon/ Provider
46270	Surgical treatment of anal fistula; subcutaneous	Requires TAR, Primary Surgeon/ Provider; Assistant Surgeon services not payable
46275	Surgical treatment of anal fistula; intersphincteric	Requires TAR, Primary Surgeon/ Provider
46280	Surgical treatment of anal fistula; transsphincteric, suprasphincteric, extrasphincteric or multiple, including placement of seton, when performed	Requires TAR, Primary Surgeon/ Provider
46285	Surgical treatment of anal fistula; second stage	Requires TAR, Primary Surgeon/ Provider; Assistant Surgeon services not payable

Excision (continued)

Code	Description	Benefit Restrictions
46288	Closure of anal fistula with rectal advancement flap	Requires TAR, Primary Surgeon/ Provider
46320	Excision external thrombotic hemorrhoid	Assistant Surgeon services not payable

Introduction

Code	Description	Benefit Restrictions
46500	Injection of sclerosing solution, hemorrhoids	Assistant Surgeon services not payable
46505	Chemodenervation of internal anal sphincter	Assistant Surgeon services not payable

Endoscopy

Code	Description	Benefit Restrictions
46600	Anoscopy; diagnostic	Assistant Surgeon services not payable
46601	Anoscopy; diagnostic, with high-resolution magnification and chemical agent enhancement	Assistant Surgeon services not payable
46604	Anoscopy; with dilation	Assistant Surgeon services not payable
46606	Anoscopy; with biopsy	Assistant Surgeon services not payable
46607	Anoscopy; with high-resolution magnification and chemical agent enhancement, with biopsy, single or multiple	Assistant Surgeon services not payable
46608	Anoscopy; with removal of foreign body	Assistant Surgeon services not payable
46610	Anoscopy; with removal of lesion by forceps or cautery	Assistant Surgeon services not payable
46611	Anoscopy; with single lesion removal by snare	Assistant Surgeon services not payable
46612	Anoscopy; with removal of multiple lesions by forceps, cautery or snare	Assistant Surgeon services not payable
46614	Anoscopy; with control of bleeding	Assistant Surgeon services not payable

Endoscopy (continued)

Code	Description	Benefit Restrictions
46615	Anoscopy; with ablation of lesion	Assistant Surgeon services not payable

Repair

Code	Description	Benefit Restrictions
46707	Repair of anorectal fistula with plug	Assistant Surgeon services not payable
46762	Sphincteroplasty, anal, implantation artificial sphincter	Non-Benefit
46947	Hemorrhoidopexy by stapling	Assistant Surgeon services not payable

Destruction

Code	Description	Benefit Restrictions
46900	Destruction of lesions, anus, simple; chemical	Assistant Surgeon services not payable
46910	Destruction lesions, anus, simple; electrodesiccation	Assistant Surgeon services not payable
46916	Destruction of lesions, anus, simple; cryosurgery	Assistant Surgeon services not payable
46917	Destruction of lesions, anus, simple; laser surgery	Assistant Surgeon services not payable
46922	Destruction of lesions, anus, simple; surgical excision	Assistant Surgeon services not payable
46924	Destruction of lesions, anus, extensive	Assistant Surgeon services not payable
46930	Destruction of internal hemorrhoids, thermal	Assistant Surgeon services not payable
46940	Curettage or cautery of anal fissure; initial	Assistant Surgeon services not payable
46942	Curettage or cautery of anal fissure; subsequent	Assistant Surgeon services not payable
46948	Hemorrhoidectomy, internal. by transanal hemorrhoidal dearterialization, 2 or more hemorrhoid columns/groups, including ultrasound guidance, with mucopexy, when performed	Assistant Surgeon services not payable

Other Procedures

Code	Description	Benefit Restrictions
46999	Unlisted procedure, anus	Requires TAR, Primary Surgeon/ Provider

Liver**Incision**

Code	Description	Benefit Restrictions
47000	Biopsy of liver, needle; percutaneous	Assistant Surgeon services not payable

Liver Transplantation

Code	Description	Benefit Restrictions
47133	Donor hepatectomy (including cold preservation), from cadaver donor	Non-Benefit
47135	Liver allotransplantation; orthotopic, partial or whole, from cadaver or living donor, any age	Requires TAR, Primary Surgeon/ Provider
47140	Donor hepatectomy (including cold preservation), living donor, left lateral segment only	Requires TAR, Primary Surgeon/ Provider
47141	Donor hepatectomy (including cold preservation), living donor, total left lobectomy	Requires TAR, Primary Surgeon/ Provider
47142	Donor hepatectomy (including cold preservation), living donor, total right lobectomy	Requires TAR, Primary Surgeon/ Provider
47143	Preparation of cadaver donor whole liver graft, without split	Non-Benefit
47144	Preparation of cadaver donor whole liver graft, with trisegment split	Non-Benefit
47145	Preparation of cadaver donor whole liver graft, with lobe split	Non-Benefit

Liver Transplantation (continued)

Code	Description	Benefit Restrictions
47146	Reconstruction of cadaver or living donor liver graft, venous anastomosis	Non-Benefit
47147	Reconstruction of cadaver or living donor liver graft, arterial anastomosis	Non-Benefit

Laparoscopy

Code	Description	Benefit Restrictions
47379	Unlisted laparoscopic procedure, liver	Requires TAR, Primary Surgeon/ Provider

Other Procedures

Code	Description	Benefit Restrictions
47383	Ablation, one or more liver tumor(s), percutaneous, cryoablation	Assistant Surgeon services not payable
47399	Unlisted procedure, liver	Requires TAR, Primary Surgeon/ Provider

Biliary Tract**Endoscopy**

Code	Description	Benefit Restrictions
47531	Injection procedure for cholangiography, percutaneous; existing access	Assistant Surgeon services not payable
47532	Injection procedure for cholangiography, percutaneous; new access	Assistant Surgeon services not payable
47533	Placement of biliary drainage catheter, percutaneous; external	Assistant Surgeon services not payable
47534	Placement of biliary drainage catheter, percutaneous; internal-external	Assistant Surgeon services not payable
47535	Conversion of external biliary drainage catheter to internal-external biliary drainage catheter, percutaneous	Assistant Surgeon services not payable
47536	Exchange of biliary drainage catheter, percutaneous	Assistant Surgeon services not payable
47537	Removal of biliary drainage catheter, percutaneous, requiring fluoroscopic guidance	Assistant Surgeon services not payable
47538	Placement of stent(s) into a bile duct, percutaneous, including cholangiography, imaging guidance, balloon dilation, catheter exchange(s) and catheter removals, each stent; existing access	Assistant Surgeon services not payable
47539	Placement of stent(s) into a bile duct, percutaneous, including cholangiography, imaging guidance, balloon dilation, catheter exchange(s) and catheter removals, each stent; new access, without placement of separate biliary drainage catheter	Assistant Surgeon services not payable
47540	Placement of stent(s) into a bile duct, percutaneous, including cholangiography, imaging guidance, balloon dilation, catheter exchange(s) and catheter removals, each stent; new access, with placement of separate biliary drainage catheter	Assistant Surgeon services not payable
47541	Placement of access through the biliary tree and into small bowel to assist with an endoscopic biliary procedure, percutaneous, new access	Assistant Surgeon services not payable

Endoscopy (continued)

Code	Description	Benefit Restrictions
47542	Balloon dilation of biliary duct(s) or of ampulla, percutaneous, each duct	Assistant Surgeon services not payable
47543	Endoluminal biopsy(ies) of biliary tree, percutaneous, any method(s), single or multiple	Assistant Surgeon services not payable
47544	Removal of calculi/debris from biliary ducts and/or gallbladder, percutaneous, including destruction of calculi by any method	Assistant Surgeon services not payable
47550	Biliary endoscopy, intraoperative	Assistant Surgeon services not payable
47552	Biliary endoscopy, percutaneous; diagnostic	Assistant Surgeon services not payable
47553	Biliary endoscopy, percutaneous; with biopsy	Assistant Surgeon services not payable
47554	Biliary endoscopy, percutaneous; with removal of calculus/calculi	Assistant Surgeon services not payable
47555	Biliary endoscopy, percutaneous; with dilation of biliary duct, without stent	Assistant Surgeon services not payable
47556	Biliary endoscopy, percutaneous; with dilation of biliary duct, with stent	Assistant Surgeon services not payable

Laparoscopy

Code	Description	Benefit Restrictions
47562	Laparoscopy, surgical; cholecystectomy	Requires TAR, Primary Surgeon/ Provider
47563	Laparoscopy, surgical; cholecystectomy with cholangiography	Requires TAR, Primary Surgeon/ Provider
47564	Laparoscopy, surgical; cholecystectomy with exploration of common duct	Requires TAR, Primary Surgeon/ Provider
47579	Unlisted laparoscopy procedure, biliary tract	Requires TAR, Primary Surgeon/ Provider

Excision

Code	Description	Benefit Restrictions
47600	Cholecystectomy	Requires TAR, Primary Surgeon/ Provider
47605	Cholecystectomy; with cholangiography	Requires TAR, Primary Surgeon/ Provider
47610	Cholecystectomy with exploration of common duct	Requires TAR, Primary Surgeon/ Provider
47612	Cholecystectomy with exploration of common duct; choledochoenterostomy	Requires TAR, Primary Surgeon/ Provider
47620	Cholecystectomy with exploration of common duct; transduodenal sphincterotomy or sphincteroplasty	Requires TAR, Primary Surgeon/ Provider

Other Procedures

Code	Description	Benefit Restrictions
47999	Unlisted procedure, biliary tract	Requires TAR, Primary Surgeon/ Provider

Pancreas**Excision**

Code	Description	Benefit Restrictions
48102	Biopsy of pancreas, percutaneous needle	Assistant Surgeon services not payable
48160	«Pancreatectomy, total or subtotal, with autologous transplantation of pancreas or pancreatic islet cells	Requires TAR»

Introduction

Code	Description	Benefit Restrictions
48400	Injection procedure for intraoperative pancreatography	Assistant Surgeon services not payable

Pancreas Transplantation

Code	Description	Benefit Restrictions
48550	Donor pancreatectomy (including cold preservation), with or without duodenal segment	Non-Benefit
48551	Preparation of cadaver donor pancreas allograft	Non-Benefit
48552	Reconstruction of cadaver donor pancreas allograft, venous anastomosis	Non-Benefit
48554	Transplantation of pancreatic allograft	Requires TAR, Primary Surgeon/ Provider
48556	Removal of transplanted pancreatic allograft	Requires TAR, Primary Surgeon/ Provider

Other Procedures

Code	Description	Benefit Restrictions
48999	Unlisted procedure, pancreas	Requires TAR, Primary Surgeon/ Provider, Assistant Surgeon services not payable
48999	Unlisted procedure, pancreas procurement	Requires TAR, Primary Surgeon/ Provider, Assistant Surgeon services not payable

Abdomen, Peritoneum and Omentum**Incision**

Code	Description	Benefit Restrictions
49002	Reopening recent laparotomy incision	Non-Benefit
49082	Abdominal paracentesis (diagnostic or therapeutic); without imaging guidance	Assistant Surgeon services not payable
49083	Abdominal paracentesis (diagnostic or therapeutic); with imaging guidance	Assistant Surgeon services not payable
49084	Peritoneal lavage, including imaging guidance, when performed	Assistant Surgeon services not payable

Excision, Destruction

Code	Description	Benefit Restrictions
49180	Biopsy, abdominal/retroperitoneal mass, percutaneous needle	Assistant Surgeon services not payable
49185	Sclerotherapy of a fluid collection, percutaneous	Assistant Surgeon services not payable
«49186	Excision or destruction, open, intra-abdominal (ie, peritoneal, mesenteric, retroperitoneal), primary or secondary tumor(s) or cyst(s), sum of the maximum length of tumor(s) or cyst(s); 5 cm or less	Requires TAR, Primary Surgeon/ Provider»
«49187	Excision or destruction, open, intra-abdominal (ie, peritoneal, mesenteric, retroperitoneal), primary or secondary tumor(s) or cyst(s), sum of the maximum length of tumor(s) or cyst(s); 5.1 to 10 cm	Requires TAR, Primary Surgeon/ Provider»
«49188	Excision or destruction, open, intra-abdominal (ie, peritoneal, mesenteric, retroperitoneal), primary or secondary tumor(s) or cyst(s), sum of the maximum length of tumor(s) or cyst(s); 10.1 to 20 cm	Requires TAR, Primary Surgeon/ Provider»
«49189	Excision or destruction, open, intra-abdominal (ie, peritoneal, mesenteric, retroperitoneal), primary or secondary tumor(s) or cyst(s), sum of the maximum length of tumor(s) or cyst(s); 20.1 to 30 cm	Requires TAR, Primary Surgeon/ Provider»
«49190	Excision or destruction, open, intra-abdominal (ie, peritoneal, mesenteric, retroperitoneal), primary or secondary tumor(s) or cyst(s), sum of the maximum length of tumor(s) or cyst(s); greater than 30 cm	Requires TAR, Primary Surgeon/ Provider»
49250	Umbilectomy, omphalectomy	Non-Benefit

Laparoscopy

Code	Description	Benefit Restrictions
49324	Laparoscopy, surgical; with insertion of tunneled intraperitoneal catheter	Assistant Surgeon services not payable
49325	Laparoscopy, surgical; with revision of previously placed intraperitoneal cannula or catheter	Assistant Surgeon services not payable
49326	Laparoscopy, surgical; with omentopexy	Assistant Surgeon services not payable
49329	Unlisted laparoscopy procedure, abdomen, peritoneum and omentum	Requires TAR, Primary Surgeon/ Provider

Introduction, Revision, Removal

Code	Description	Benefit Restrictions
49400	Injection of air or contrast into peritoneal cavity	Assistant Surgeon services not payable
49405	Image-guided fluid collection drainage by catheter; visceral, percutaneous	Assistant Surgeon services not payable
49406	Image-guided fluid collection drainage by catheter; peritoneal or retroperitoneal, percutaneous	Assistant Surgeon services not payable
49407	Image-guided fluid collection drainage by catheter; peritoneal or retroperitoneal, transvaginal or transrectal	Assistant Surgeon services not payable
49411	49411 Placement of interstitial device(s) for radiation therapy guidance, percutaneous, intra-abdominal, intra-pelvic, and/or retroperitoneum, single or multiple	Assistant Surgeon services not payable
49418	Insertion of tunneled intraperitoneal catheter, complete procedure	Assistant Surgeon services not payable
49419	Insertion of tunneled intraperitoneal catheter, with subcutaneous port	Assistant Surgeon services not payable
49421	Insertion of tunneled intraperitoneal catheter for dialysis, open	Assistant Surgeon services not payable
49423	Exchange of previously placed abscess or cyst drainage catheter under radiological guidance	Assistant Surgeon services not payable
49424	49424 Contrast injection for assessment of abscess or cyst via previously placed drainage catheter or tube	Assistant Surgeon services not payable
49427	Injection, evaluation of previously placed peritoneal-venous shunt	Assistant Surgeon services not payable

Initial Placement

Code	Description	Benefit Restrictions
49440	Insertion of gastrostomy tube, percutaneous, under fluoroscopic guidance	Assistant Surgeon services not payable
49441	Insertion of duodenostomy or jejunostomy tube, percutaneous, under fluoroscopic guidance	Assistant Surgeon services not payable
49442	Insertion of cecostomy or other colonic tube, percutaneous, under fluoroscopic guidance	Assistant Surgeon services not payable

Conversion

Code	Description	Benefit Restrictions
49446	Conversion of gastrostomy tube to gastro-jejunostomy tube, percutaneous, under fluoroscopic guidance	Assistant Surgeon services not payable

Replacement

Code	Description	Benefit Restrictions
49450	Replacement of gastrostomy or cecostomy (or other colonic) tube, percutaneous, under fluoroscopic guidance	Assistant Surgeon services not payable
49451	Replacement of duodenostomy or jejunostomy tube, percutaneous, under fluoroscopic guidance	Assistant Surgeon services not payable
49452	Replacement of gastro-jejunostomy tube, percutaneous, under fluoroscopic guidance	Assistant Surgeon services not payable

Mechanical Removal of Obstructive Material

Code	Description	Benefit Restrictions
49460	Mechanical removal of obstructive material from gastrostomy, duodenostomy, jejunostomy, gastro-jejunostomy, or cecostomy (or other colonic) tube, any method, under fluoroscopic guidance	Assistant Surgeon services not payable

Other

Code	Description	Benefit Restrictions
49465	Contrast injection(s) for radiological evaluation of existing gastrostomy, duodenostomy, jejunostomy, gastro-jejunostomy, or cecostomy (or other colonic) tube, from a percutaneous approach	Assistant Surgeon services not payable

Repair, Hernioplasty, Herniorrhaphy, Herniotomy

Code	Description	Benefit Restrictions
49505	Repair inguinal hernia, age 5 years or older; reducible	Requires TAR, Primary Surgeon/ Provider
49520	Repair recurrent inguinal hernia, any age; reducible	Requires TAR, Primary Surgeon/ Provider

Repair, Hernioplasty, Herniorrhaphy, Herniotomy (continued)

Code	Description	Benefit Restrictions
49525	Repair inguinal hernia, sliding, any age	Requires TAR, Primary Surgeon/ Provider
49540	Repair lumbar hernia	Requires TAR, Primary Surgeon/ Provider
49550	Repair initial femoral hernia, any age; reducible	Requires TAR, Primary Surgeon/ Provider
49555	Repair recurrent femoral hernia; reducible	Requires TAR, Primary Surgeon/ Provider
49600	Repair small omphalocele, with primary closure	Requires TAR, Primary Surgeon/ Provider

Laparoscopy

Code	Description	Benefit Restrictions
49650	Laparoscopy, surgical; repair initial inguinal hernia	Requires TAR, Primary Surgeon/ Provider
49651	Laparoscopy, surgical; repair recurrent inguinal hernia	Requires TAR, Primary Surgeon/ Provider
49659	Unlisted laparoscopy procedure, hernioplasty, herniorrhaphy, herniotomy	Requires TAR, Primary Surgeon/ Provider

Other Procedures

Code	Description	Benefit Restrictions
49999	Unlisted procedure, abdomen, peritoneum and omentum	Requires TAR, Primary Surgeon/ Provider

Legend

Symbols used in the document above are explained in the following table.

Symbol	Description
«	This is a change mark symbol. It is used to indicate where on the page the most recent change begins.
»	This is a change mark symbol. It is used to indicate where on the page the most recent change ends.