



EVH Preauthorization Cardiology Services Scope | AdHoc File: 07/01/2026 Go-Live | Molina - Medicare

EVH Code Update Policy & Procedure - CPT Codes

This list is pending code updates effective 7/1/2026 from CMS. EVH will notify Molina in writing if the CMS final guidance impacts the scope of this implementation.

Code Updates - Follow CMS CPT (service codes) yearly publication. Code updates can include adding new codes, or removing termed codes. EVH utilizes the CMS final published rule for code updates and follows the yearly publication cadence.

Last CMS publication: Q2 2026; Code Effective Date: 04/01/2026

HealthPlan	LOB	State	Specialty	CPT	CPTCodeDescription	SubCategory	PA Required	CMS Effective Date	Molina Effective Date
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93241	External electrocardiographic recording for more than 48 hours up to 7 days by continuous rhythm recording and storage; includes recording, scanning analysis with report, review and interpretation	Cardiology	Yes	1/1/2021	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93242	External electrocardiographic recording for more than 48 hours up to 7 days by continuous rhythm recording and storage; recording (includes connection and initial recording)	Cardiology	Yes	1/1/2021	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93243	External electrocardiographic recording for more than 48 hours up to 7 days by continuous rhythm recording and storage; scanning analysis with report	Cardiology	Yes	1/1/2021	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93244	External electrocardiographic recording for more than 48 hours up to 7 days by continuous rhythm recording and storage; review and interpretation	Cardiology	Yes	1/1/2021	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93245	External electrocardiographic recording for more than 7 days up to 15 days by continuous rhythm recording and storage; includes recording, scanning analysis with report, review and interpretation	Cardiology	Yes	1/1/2021	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93246	External electrocardiographic recording for more than 7 days up to 15 days by continuous rhythm recording and storage; recording (includes connection and initial recording)	Cardiology	Yes	1/1/2021	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93247	External electrocardiographic recording for more than 7 days up to 15 days by continuous rhythm recording and storage; scanning analysis with report	Cardiology	Yes	1/1/2021	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93248	External electrocardiographic recording for more than 7 days up to 15 days by continuous rhythm recording and storage; review and interpretation	Cardiology	Yes	1/1/2021	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93264	Remote monitoring of a wireless pulmonary artery pressure sensor for up to 30 days, including at least weekly downloads of pulmonary artery pressure recordings, interpretation(s), trend analysis, and report(s) by a physician or other qualified health care professional	Cardiovascular	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	92920	Percutaneous transluminal coronary angioplasty, single major coronary artery and/or its branch(es)	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	92924	Percutaneous transluminal coronary atherectomy, with coronary angioplasty when performed, single major coronary artery and/or its branch(es)	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	92928	Percutaneous transcatheter placement of intracoronary stent(s), with coronary angioplasty when performed, single major coronary artery and/or its branch(es); 1 lesion involving 1 or more coronary segments	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	92930	Percutaneous transcatheter placement of intracoronary stent(s), with coronary angioplasty when performed, single major coronary artery and/or its branch(es); 2 or more distinct coronary lesions with 2 or more coronary stents deployed in 2 or more coronary segments, or a bifurcation lesion requiring angioplasty and/or stenting in both the main artery and the side branch	Cardiovascular	Yes	1/1/2026	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	92933	Percutaneous transluminal coronary atherectomy, with intracoronary stent, with coronary angioplasty when performed, single major coronary artery and/or its branch(es)	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	92937	Percutaneous transluminal revascularization of or through coronary artery bypass graft (internal mammary, free arterial, venous), any combination of intracoronary stent, atherectomy and angioplasty, including distal protection when performed, single major coronary artery and/or its branches	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	92941	Percutaneous transluminal revascularization of acute total/subtotal occlusion during acute myocardial infarction, any combination of intracoronary stent, atherectomy and angioplasty, including aspiration thrombectomy when performed, single major coronary artery and/or its branches or single bypass graft and/or its subtended branches	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	92943	Percutaneous transluminal revascularization of chronic total occlusion, single coronary artery, coronary artery branch, or coronary artery bypass graft, and/or subtended major coronary artery branches of the bypass graft, any combination of intracoronary stent, atherectomy and angioplasty; antegrade approach	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	92973	Percutaneous transluminal coronary mechanical aspiration thrombectomy (List separately in addition to code for primary procedure)	Cardiovascular	Yes	1/1/2002	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	92974	Transcatheter placement of radiation delivery device for subsequent coronary intravascular brachytherapy (List separately in addition to code for primary procedure)	Cardiovascular	Yes	1/1/2002	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	92986	Percutaneous balloon valvuloplasty; aortic valve	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	92987	Percutaneous balloon valvuloplasty; mitral valve	Cardiovascular	Yes	1/1/1997	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	92990	Percutaneous balloon valvuloplasty; pulmonary valve	Cardiovascular	Yes	1/1/2016	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33289	Transcatheter implantation of wireless pulmonary artery pressure sensor for long-term hemodynamic monitoring, including deployment and calibration of the sensor, right heart catheterization, selective pulmonary catheterization, radiological supervision and interpretation, and pulmonary artery angiography, when performed	Cardiovascular	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33300	Repair of cardiac wound; without bypass	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33305	Repair of cardiac wound; with cardiopulmonary bypass	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33310	Cardiotomy, exploratory (includes removal of foreign body, atrial or ventricular thrombus); without bypass	Cardiovascular	Yes	1/1/1993	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33315	Cardiotomy, exploratory (includes removal of foreign body, atrial or ventricular thrombus); with cardiopulmonary bypass	Cardiovascular	Yes	1/1/1993	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33320	Suture repair of aorta or great vessels; without shunt or cardiopulmonary bypass	Cardiovascular	Yes	1/1/1997	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33321	Suture repair of aorta or great vessels; with shunt bypass	Cardiovascular	Yes	1/1/1997	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33322	Suture repair of aorta or great vessels; with cardiopulmonary bypass	Cardiovascular	Yes	1/1/1997	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33330	Insertion of Graft, Aorta or Great Vessels; without Shunt, or Cardiopulmonary Bypass	Cardiovascular	Yes	1/1/1997	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33335	Insertion of Graft, Aorta or Great Vessels; with Cardiopulmonary Bypass	Cardiovascular	Yes	1/1/1997	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37242	Vascular embolization or occlusion, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention; arterial, other than hemorrhage or tumor (eg, congenital or acquired arterial malformations, arteriovenous malformations, arteriovenous fistulas, aneurysms, pseudoaneurysms)	Cardiovascular	Yes	4/1/2014	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37243	Vascular embolization or occlusion, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention; for tumors, organ ischemia, or infarction	Cardiovascular	Yes	4/1/2014	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37246	Transluminal balloon angioplasty (except lower extremity artery(ies) for occlusive disease, intracranial, coronary, pulmonary, or dialysis circuit), open or percutaneous, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty within the same artery; initial artery	Cardiovascular	Yes	1/1/2017	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37248	Transluminal balloon angioplasty (except dialysis circuit), open or percutaneous, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty within the same vein; initial vein	Cardiovascular	Yes	1/1/2017	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37254	Revascularization, endovascular, open or percutaneous, iliac vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; straightforward lesion, initial vessel	Cardiovascular	Yes	1/1/2026	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37256	Revascularization, endovascular, open or percutaneous, iliac vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; complex lesion, initial vessel	Cardiovascular	Yes	1/1/2026	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37258	Revascularization, endovascular, open or percutaneous, iliac vascular territory, with transluminal stent placement, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement and angioplasty when performed, within the same artery, unilateral; straightforward lesion, initial vessel	Cardiovascular	Yes	1/1/2026	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37260	Revascularization, endovascular, open or percutaneous, iliac vascular territory, with transluminal stent placement, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement and angioplasty when performed, within the same artery, unilateral; complex lesion, initial vessel	Cardiovascular	Yes	1/1/2026	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37263	Revascularization, endovascular, open or percutaneous, femoral and popliteal vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; straightforward lesion, initial vessel	Cardiovascular	Yes	1/1/2026	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37265	Revascularization, endovascular, open or percutaneous, femoral and popliteal vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; complex lesion, initial vessel	Cardiovascular	Yes	1/1/2026	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37267	Revascularization, endovascular, open or percutaneous, femoral and popliteal vascular territory, with transluminal stent placement, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement and angioplasty when performed, within the same artery, unilateral; straightforward lesion, initial vessel	Cardiovascular	Yes	1/1/2026	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37269	Revascularization, endovascular, open or percutaneous, femoral and popliteal vascular territory, with transluminal stent placement, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement and angioplasty when performed, within the same artery, unilateral; complex lesion, initial vessel	Cardiovascular	Yes	1/1/2026	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37271	Revascularization, endovascular, open or percutaneous, femoral and popliteal vascular territory, with transluminal atherectomy, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the atherectomy and angioplasty when performed, within the same artery, unilateral; straightforward lesion, initial vessel	Cardiovascular	Yes	1/1/2026	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37273	Revascularization, endovascular, open or percutaneous, femoral and popliteal vascular territory, with transluminal atherectomy, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the atherectomy and angioplasty when performed, within the same artery, unilateral; complex lesion, initial vessel	Cardiovascular	Yes	1/1/2026	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37275	Revascularization, endovascular, open or percutaneous, femoral and popliteal vascular territory, with transluminal stent placement, with transluminal atherectomy, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement, atherectomy, and angioplasty when performed, within the same artery, unilateral; straightforward lesion, initial vessel	Cardiovascular	Yes	1/1/2026	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37277	Revascularization, endovascular, open or percutaneous, femoral and popliteal vascular territory, with transluminal stent placement, with transluminal atherectomy, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement, atherectomy, and angioplasty when performed, within the same artery, unilateral; complex lesion, initial vessel	Cardiovascular	Yes	1/1/2026	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37280	Revascularization, endovascular, open or percutaneous, tibial and peroneal vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; straightforward lesion, initial vessel	Cardiovascular	Yes	1/1/2026	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37282	Revascularization, endovascular, open or percutaneous, tibial and peroneal vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; complex lesion, initial vessel	Cardiovascular	Yes	1/1/2026	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37284	Revascularization, endovascular, open or percutaneous, tibial and peroneal vascular territory, with transluminal stent placement, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement and angioplasty when performed, within the same artery, unilateral; straightforward lesion, initial vessel	Cardiovascular	Yes	1/1/2026	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37286	Revascularization, endovascular, open or percutaneous, tibial and peroneal vascular territory, with transluminal stent placement, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement and angioplasty when performed, within the same artery, unilateral; complex lesion, initial vessel	Cardiovascular	Yes	1/1/2026	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37288	Revascularization, endovascular, open or percutaneous, tibial and peroneal vascular territory, with transluminal atherectomy, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the atherectomy and angioplasty when performed, within the same artery, unilateral; straightforward lesion, initial vessel	Cardiovascular	Yes	1/1/2026	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37290	Revascularization, endovascular, open or percutaneous, tibial and peroneal vascular territory, with transluminal atherectomy, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the atherectomy and angioplasty when performed, within the same artery, unilateral; complex lesion, initial vessel	Cardiovascular	Yes	1/1/2026	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37292	Revascularization, endovascular, open or percutaneous, tibial and peroneal vascular territory, with transluminal stent placement, with transluminal atherectomy, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement, atherectomy, and angioplasty when performed, within the same artery, unilateral; straightforward lesion, initial vessel	Cardiovascular	Yes	1/1/2026	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37294	Revascularization, endovascular, open or percutaneous, tibial and peroneal vascular territory, with transluminal stent placement, with transluminal atherectomy, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement, atherectomy, and angioplasty when performed, within the same artery, unilateral; complex lesion, initial vessel	Cardiovascular	Yes	1/1/2026	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37296	Revascularization, endovascular, open or percutaneous, inframalleolar vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; straightforward lesion, initial vessel	Cardiovascular	Yes	1/1/2026	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37298	Revascularization, endovascular, open or percutaneous, inframalleolar vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; complex lesion, initial vessel	Cardiovascular	Yes	1/1/2026	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33510	Coronary artery bypass, vein only; single coronary venous graft	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33511	Coronary artery bypass, vein only; 2 coronary venous grafts	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33512	Coronary artery bypass, vein only; 3 coronary venous grafts	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33513	Coronary artery bypass, vein only; 4 coronary venous grafts	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33514	Coronary artery bypass, vein only; 5 coronary venous grafts	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33516	Coronary artery bypass, vein only; 6 or more coronary venous grafts	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33517	Coronary artery bypass, using venous graft(s) and arterial graft(s); single vein graft (List separately in addition to code for primary procedure)	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33518	Coronary artery bypass, using venous graft(s) and arterial graft(s); 2 venous grafts (List separately in addition to code for primary procedure)	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33519	Coronary artery bypass, using venous graft(s) and arterial graft(s); 3 venous grafts (List separately in addition to code for primary procedure)	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33521	Coronary artery bypass, using venous graft(s) and arterial graft(s); 4 venous grafts (List separately in addition to code for primary procedure)	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33522	Coronary artery bypass, using venous graft(s) and arterial graft(s); 5 venous grafts (List separately in addition to code for primary procedure)	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33523	Coronary artery bypass, using venous graft(s) and arterial graft(s); 6 or more venous grafts (List separately in addition to code for primary procedure)	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33530	Reoperation, coronary artery bypass procedure or valve procedure, more than 1 month after original operation (List separately in addition to code for primary procedure)	Cardiovascular	Yes	6/5/2000	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33533	Coronary Artery Bypass, Using Arterial Graft(S); single Arterial Graft	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33534	Coronary Artery Bypass, Using Arterial Graft(S); 2 Coronary Arterial Grafts	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33535	Coronary Artery Bypass, Using Arterial Graft(S); 3 Coronary Arterial Grafts	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33536	Coronary artery bypass, using arterial graft(s); 4 or more coronary arterial grafts	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33542	Myocardial resection (eg, ventricular aneurysmectomy)	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33545	Repair of postinfarction ventricular septal defect, with or without myocardial resection	Cardiovascular	Yes	4/1/2007	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33548	Surgical ventricular restoration procedure, includes prosthetic patch, when performed (eg, ventricular remodeling, SVR, SAVER, Dor procedures)	Cardiovascular	Yes	1/1/2006	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33572	Coronary endarterectomy, open, any method, of left anterior descending, circumflex, or right coronary artery performed in conjunction with coronary artery bypass graft procedure, each vessel (List separately in addition to primary procedure)	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33600	Closure of atrioventricular valve (mitral or tricuspid) by suture or patch	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33602	Closure of semilunar valve (aortic or pulmonary) by suture or patch	Cardiovascular	Yes	7/1/2011	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33606	Anastomosis of Pulmonary Artery To Aorta (Damus-Kaye-Stansel Procedure)	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33608	Repair of complex cardiac anomaly other than pulmonary atresia with ventricular septal defect by construction or replacement of conduit from right or left ventricle to pulmonary artery	Cardiovascular	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33610	Repair of complex cardiac anomalies (eg, single ventricle with subaortic obstruction) by surgical enlargement of ventricular septal defect	Cardiovascular	Yes	7/1/2011	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33611	Repair of double outlet right ventricle with intraventricular tunnel repair;	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33612	Repair of double outlet right ventricle with intraventricular tunnel repair; with repair of right ventricular outflow tract obstruction	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33615	Repair of complex cardiac anomalies (eg, tricuspid atresia) by closure of atrial septal defect and anastomosis of atria or vena cava to pulmonary artery (simple Fontan procedure)	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33617	Repair of complex cardiac anomalies (eg, single ventricle) by modified Fontan procedure	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33619	Repair of single ventricle with aortic outflow obstruction and aortic arch hypoplasia (hypoplastic left heart syndrome) (eg, Norwood procedure)	Cardiovascular	Yes	1/1/2011	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33620	Application of Right and Left Pulmonary Artery Bands (Eg, Hybrid Approach Stage 1)	Cardiovascular	Yes	1/1/2011	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33621	Transsthoracic insertion of catheter for stent placement with catheter removal and closure (eg, hybrid approach stage 1)	Cardiovascular	Yes	1/1/2011	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33622	Reconstruction of complex cardiac anomaly (eg, single ventricle or hypoplastic left heart) with palliation of single ventricle with aortic outflow obstruction and aortic arch hypoplasia, creation of cavopulmonary anastomosis, and removal of right and left pulmonary bands (eg, hybrid approach stage 2, Norwood, bidirectional Glenn, pulmonary artery debanding)	Cardiovascular	Yes	1/1/2011	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33641	Repair atrial Septal Defect, Secundum, with Cardiopulmonary Bypass, with or without Patch	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33645	Direct or patch closure, sinus venosus, with or without anomalous pulmonary venous drainage	Cardiovascular	Yes	1/1/2007	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33647	Repair of atrial septal defect and ventricular septal defect, with direct or patch closure	Cardiovascular	Yes	7/1/2011	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33660	Repair of incomplete or partial atrioventricular canal (ostium primum atrial septal defect), with or without atrioventricular valve repair	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33665	Repair of intermediate or transitional atrioventricular canal, with or without atrioventricular valve repair	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33670	Repair of Complete atrioventricular Canal, with or without Prosthetic Valve	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33675	Closure of multiple ventricular septal defects;	Cardiovascular	Yes	1/1/2007	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33676	Closure of multiple ventricular septal defects; with pulmonary valvotomy or infundibular resection (acyanotic)	Cardiovascular	Yes	7/1/2011	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33677	Closure of multiple ventricular septal defects; with removal of pulmonary artery band, with or without gusset	Cardiovascular	Yes	7/1/2011	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33681	Closure of single ventricular septal defect, with or without patch;	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33684	Closure of single ventricular septal defect, with or without patch; with pulmonary valvotomy or infundibular resection (acyanotic)	Cardiovascular	Yes	4/1/2008	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33688	Closure of single ventricular septal defect, with or without patch; with removal of pulmonary artery band, with or without gusset	Cardiovascular	Yes	4/1/2008	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33690	Banding of pulmonary artery	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33692	Complete repair tetralogy of Fallot without pulmonary atresia;	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33694	Complete repair tetralogy of Fallot without pulmonary atresia; with transannular patch	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33697	Complete repair tetralogy of Fallot with pulmonary atresia including construction of conduit from right ventricle to pulmonary artery and closure of ventricular septal defect	Cardiovascular	Yes	1/1/2006	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33702	Repair sinus of Valsalva fistula, with cardiopulmonary bypass;	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33710	Repair sinus of Valsalva fistula, with cardiopulmonary bypass; with repair of ventricular septal defect	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33720	Repair Sinus of Valsalva Aneurysm, with Cardiopulmonary Bypass	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33724	Repair of isolated partial anomalous pulmonary venous return (eg, Scimitar Syndrome)	Cardiovascular	Yes	1/1/2007	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33726	Repair of pulmonary venous stenosis	Cardiovascular	Yes	4/1/2008	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33730	Complete repair of anomalous pulmonary venous return (supracardiac, intracardiac, or infracardiac types)	Cardiovascular	Yes	1/1/1998	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33732	Repair of cor triatriatum or supravulvular mitral ring by resection of left atrial membrane	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33735	atrial Septectomy or Septostomy; Closed Heart (Blalock-Hanlon Type Operation)	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33736	atrial Septectomy or Septostomy; Open Heart with Cardiopulmonary Bypass	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33750	Shunt; subclavian to pulmonary artery (Blalock-Taussig type operation)	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33755	Shunt; ascending aorta to pulmonary artery (Waterston type operation)	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33762	Shunt; Descending Aorta To Pulmonary Artery (Potts-Smith Type Operation)	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33764	Shunt; Central, with Prosthetic Graft	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33766	Shunt; superior vena cava to pulmonary artery for flow to 1 lung (classical Glenn procedure)	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33767	Shunt; superior vena cava to pulmonary artery for flow to both lungs (bidirectional Glenn procedure)	Cardiovascular	Yes	1/1/2011	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33768	Anastomosis, cavopulmonary, second superior vena cava (List separately in addition to primary procedure)	Cardiovascular	Yes	10/1/2017	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33770	Repair of transposition of the great arteries with ventricular septal defect and subpulmonary stenosis; without surgical enlargement of ventricular septal defect	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33771	Repair of transposition of the great arteries with ventricular septal defect and subpulmonary stenosis; with surgical enlargement of ventricular septal defect	Cardiovascular	Yes	1/1/2010	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33774	Repair of transposition of the great arteries, atrial baffle procedure (eg, Mustard or Senning type) with cardiopulmonary bypass;	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33775	Repair of transposition of the great arteries, atrial baffle procedure (eg, Mustard or Senning type) with cardiopulmonary bypass; with removal of pulmonary band	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33776	Repair of transposition of the great arteries, atrial baffle procedure (eg, Mustard or Senning type) with cardiopulmonary bypass; with closure of ventricular septal defect	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33777	Repair of transposition of the great arteries, atrial baffle procedure (eg, Mustard or Senning type) with cardiopulmonary bypass; with repair of subpulmonic obstruction	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33778	Repair of transposition of the great arteries, aortic pulmonary artery reconstruction (eg, Jatene type);	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33779	Repair of transposition of the great arteries, aortic pulmonary artery reconstruction (eg, Jatene type); with removal of pulmonary band	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33780	Repair of transposition of the great arteries, aortic pulmonary artery reconstruction (eg, Jatene type); with closure of ventricular septal defect	Cardiovascular	Yes	1/1/2010	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33781	Repair of transposition of the great arteries, aortic pulmonary artery reconstruction (eg, Jatene type); with repair of subpulmonic obstruction	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33782	Aortic root translocation with ventricular septal defect and pulmonary stenosis repair (ie, Nikaidoh procedure); without coronary ostium reimplantation	Cardiovascular	Yes	1/1/2010	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33783	Aortic root translocation with ventricular septal defect and pulmonary stenosis repair (ie, Nikaidoh procedure); with reimplantation of 1 or both coronary ostia	Cardiovascular	Yes	1/1/2010	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33786	Total Repair, Truncus Arteriosus (Rastelli Type Operation)	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33788	Reimplantation of an anomalous pulmonary artery	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33800	Aortic suspension (aortopexy) for tracheal decompression (eg, for tracheomalacia) (separate procedure)	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33802	Division of aberrant vessel (vascular ring);	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33803	Division of Aberrant Vessel (Vascular Ring); with Reanastomosis	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33814	Obliteration of aortopulmonary septal defect, with cardiopulmonary bypass	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33820	Repair of patent ductus arteriosus; by ligation	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33824	Repair of patent ductus arteriosus; by division, 18 years and older	Cardiovascular	Yes	1/1/1998	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33840	Excision of coarctation of aorta, with or without associated patent ductus arteriosus; with direct anastomosis	Cardiovascular	Yes	1/1/2011	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33845	Excision of coarctation of aorta, with or without associated patent ductus arteriosus; with graft	Cardiovascular	Yes	1/1/2011	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33851	Excision of coarctation of aorta, with or without associated patent ductus arteriosus; repair using either left subclavian artery or prosthetic material as gusset for enlargement	Cardiovascular	Yes	1/1/2011	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33852	Repair of hypoplastic or interrupted aortic arch using autogenous or prosthetic material; without cardiopulmonary bypass	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33853	Repair of hypoplastic or interrupted aortic arch using autogenous or prosthetic material; with cardiopulmonary bypass	Cardiovascular	Yes	1/1/2011	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33858	Ascending aorta graft, with cardiopulmonary bypass, includes valve suspension, when performed; for aortic dissection	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33859	Ascending aorta graft, with cardiopulmonary bypass, includes valve suspension, when performed; for aortic disease other than dissection (eg, aneurysm)	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33863	Ascending aorta graft, with cardiopulmonary bypass, with aortic root replacement using valved conduit and coronary reconstruction (eg, Bentall)	Cardiovascular	Yes	1/1/2011	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33864	Ascending aorta graft, with cardiopulmonary bypass with valve suspension, with coronary reconstruction and valve-sparing aortic root remodeling (eg, David Procedure, Yacoub Procedure)	Cardiovascular	Yes	4/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33871	Transverse aortic arch graft, with cardiopulmonary bypass, with profound hypothermia, total circulatory arrest and isolated cerebral perfusion with reimplantation of arch vessel(s) (eg, island pedicle or individual arch vessel reimplantation)	Cardiovascular	Yes	1/1/2020	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33875	Descending Thoracic Aorta Graft, with or without Bypass	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33877	Repair of thoracoabdominal aortic aneurysm with graft, with or without cardiopulmonary bypass	Cardiovascular	Yes	1/1/2004	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33880	Endovascular repair of thoracic aorta, including pre-procedure sizing and device selection, nonselective catheterization(s), all associated radiological supervision and interpretation; by deployment of an aorto-aortic tube endograft covering the left subclavian artery and all aortic tube endograft extension(s) proximally in the aortic arch and ascending aorta and distally to the celiac artery, when performed	Cardiovascular	Yes	1/1/2006	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33881	Endovascular repair of thoracic aorta, including pre-procedure sizing and device selection, nonselective catheterization(s), all associated radiological supervision and interpretation; by deployment of an aorto-aortic tube endograft not involving coverage of the left subclavian artery origin and all endograft extension(s) placed from the level of the left subclavian carotid artery to the celiac artery	Cardiovascular	Yes	1/1/2006	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33883	Delayed placement of proximal extension prosthesis(es) not involving coverage of the left subclavian artery origin, after endovascular repair of the thoracic aorta, including pre-procedure sizing and device selection, nonselective catheterization(s), all associated radiological supervision and interpretation, and treatment zone angioplasty/stenting, when performed	Cardiovascular	Yes	1/1/2006	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33886	Delayed placement of distal extension prosthesis(es) from the level of the left subclavian artery to the celiac artery, after endovascular repair of descending thoracic aorta, including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation	Cardiovascular	Yes	1/1/2006	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36000	Introduction of needle or intracatheter, vein	Cardiovascular	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36005	Injection procedure for extremity venography (including introduction of needle or intracatheter)	Cardiovascular	Yes	1/1/2015	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36010	Introduction of Catheter, Superior or Inferior Vena Cava	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36011	Selective catheter placement, venous system; first order branch (eg, renal vein, jugular vein)	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36140	Introduction of needle or intracatheter, upper or lower extremity artery	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36200	Introduction of Catheter, Aorta	Cardiovascular	Yes	1/1/2013	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36215	Selective catheter placement, arterial system; each first order thoracic or brachiocephalic branch, within a vascular family	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36216	Selective catheter placement, arterial system; initial second order thoracic or brachiocephalic branch, within a vascular family	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36217	Selective Catheter Placement, Arterial System; initial Third order or More Selective Thoracic or Brachiocephalic Branch, within A Vascular Family	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36221	Non-selective catheter placement, thoracic aorta, with angiography of the extracranial carotid, vertebral, and/or intracranial vessels, unilateral or bilateral, and all associated radiological supervision and interpretation, includes angiography of the cervicocerebral arch, when performed	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36222	Selective catheter placement, common carotid or innominate artery, unilateral, any approach, with angiography of the ipsilateral extracranial carotid circulation and all associated radiological supervision and interpretation, includes angiography of the cervicocerebral arch, when performed	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36223	Selective catheter placement, common carotid or innominate artery, unilateral, any approach, with angiography of the ipsilateral intracranial carotid circulation and all associated radiological supervision and interpretation, includes angiography of the extracranial carotid and cervicocerebral arch, when performed	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36224	Selective catheter placement, internal carotid artery, unilateral, with angiography of the ipsilateral intracranial carotid circulation and all associated radiological supervision and interpretation, includes angiography of the extracranial carotid and cervicocerebral arch, when performed	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36225	Selective catheter placement, subclavian or innominate artery, unilateral, with angiography of the ipsilateral vertebral circulation and all associated radiological supervision and interpretation, includes angiography of the cervicocerebral arch, when performed	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36226	Selective Catheter Placement, Vertebral Artery, Unilateral, with Angiography of the Ipsilateral Vertebral Circulation and all Associated Radiological Supervision and Interpretation, includes Angiography of the Cervicocerebral Arch, when performed	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36245	Selective catheter placement, arterial system; each first order abdominal, pelvic, or lower extremity artery branch, within a vascular family	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36246	Selective catheter placement, arterial system; initial second order abdominal, pelvic, or lower extremity artery branch, within a vascular family	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36247	Selective catheter placement, arterial system; initial third order or more selective abdominal, pelvic, or lower extremity artery branch, within a vascular family	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36251	Selective catheter placement (first-order), main renal artery and any accessory renal artery(s) for renal angiography, including arterial puncture and catheter placement(s), fluoroscopy, contrast injection(s), image postprocessing, permanent recording of images, and radiological supervision and interpretation, including pressure gradient measurements when performed, and flush aortogram when performed; unilateral	Cardiovascular	Yes	1/1/2012	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36252	Selective catheter placement (first-order), main renal artery and any accessory renal artery(s) for renal angiography, including arterial puncture and catheter placement(s), fluoroscopy, contrast injection(s), image postprocessing, permanent recording of images, and radiological supervision and interpretation, including pressure gradient measurements when performed, and flush aortogram when performed; bilateral	Cardiovascular	Yes	1/1/2012	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36253	Superselective catheter placement (one or more second order or higher renal artery branches) renal artery and any accessory renal artery(s) for renal angiography, including arterial puncture, catheterization, fluoroscopy, contrast injection(s), image postprocessing, permanent recording of images, and radiological supervision and interpretation, including pressure gradient measurements when performed, and flush aortogram when performed; unilateral	Cardiovascular	Yes	1/1/2012	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36254	Superselective catheter placement (one or more second order or higher renal artery branches) renal artery and any accessory renal artery(s) for renal angiography, including arterial puncture, catheterization, fluoroscopy, contrast injection(s), image postprocessing, permanent recording of images, and radiological supervision and interpretation, including pressure gradient measurements when performed, and flush aortogram when performed; bilateral	Cardiovascular	Yes	10/1/2014	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33250	Operative ablation of supraventricular arrhythmogenic focus or pathway (eg, Wolff-Parkinson-White, atrioventricular node re-entry), tract(s) and/or focus (foci); without cardiopulmonary bypass	Cardiovascular	Yes	1/1/1993	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33251	Operative ablation of supraventricular arrhythmogenic focus or pathway (eg, Wolff-Parkinson-White, atrioventricular node re-entry), tract(s) and/or focus (foci); with cardiopulmonary bypass	Cardiovascular	Yes	1/1/1993	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33254	Operative tissue ablation and reconstruction of atria, limited (eg, modified maze procedure)	Cardiovascular	Yes	1/1/2007	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33255	Operative tissue ablation and reconstruction of atria, extensive (eg, maze procedure); without cardiopulmonary bypass	Cardiovascular	Yes	1/1/2007	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33256	Operative tissue ablation and reconstruction of atria, extensive (eg, maze procedure); with cardiopulmonary bypass	Cardiovascular	Yes	1/1/2007	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33257	Operative tissue ablation and reconstruction of atria, performed at the time of other cardiac procedure(s), limited (eg, modified maze procedure) (List separately in addition to code for primary procedure)	Cardiovascular	Yes	1/1/2007	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33258	Operative tissue ablation and reconstruction of atria, performed at the time of other cardiac procedure(s), extensive (eg, maze procedure), without cardiopulmonary bypass (List separately in addition to code for primary procedure)	Cardiovascular	Yes	1/1/2008	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33259	Operative tissue ablation and reconstruction of atria, performed at the time of other cardiac procedure(s), extensive (eg, maze procedure), with cardiopulmonary bypass (List separately in addition to code for primary procedure)	Cardiovascular	Yes	1/1/2008	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33261	Operative ablation of ventricular arrhythmogenic focus with cardiopulmonary bypass	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33265	Endoscopy, surgical; operative tissue ablation and reconstruction of atria, limited (eg, modified maze procedure), without cardiopulmonary bypass	Cardiovascular	Yes	7/1/2008	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33266	Endoscopy, surgical; operative tissue ablation and reconstruction of atria, extensive (eg, maze procedure), without cardiopulmonary bypass	Cardiovascular	Yes	7/1/2008	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33267	Exclusion of left atrial appendage, open, any method (eg, excision, isolation via stapling, oversewing, ligation, plication, clip)	Cardiovascular	Yes	1/1/2022	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33268	Exclusion of left atrial appendage, open, performed at the time of other sternotomy or thoracotomy procedure(s), any method (eg, excision, isolation via stapling, oversewing, ligation, plication, clip) (List separately in addition to code for primary procedure)	Cardiovascular	Yes	1/1/2022	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33269	Exclusion of left atrial appendage, thoracoscopic, any method (eg, excision, isolation via stapling, oversewing, ligation, plication, clip)	Cardiovascular	Yes	1/1/2022	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37184	Primary percutaneous transluminal mechanical thrombectomy, noncoronary, non-intracranial, arterial or arterial bypass graft, including fluoroscopic guidance and intraprocedural pharmacological thrombolytic injection(s); initial vessel	Cardiovascular	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37187	Percutaneous transluminal mechanical thrombectomy, vein(s), including intraprocedural pharmacological thrombolytic injections and fluoroscopic guidance	Cardiovascular	Yes	1/1/2006	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37188	Percutaneous transluminal mechanical thrombectomy, vein(s), including intraprocedural pharmacological thrombolytic injections and fluoroscopic guidance, repeat treatment on subsequent day during course of thrombolytic therapy	Cardiovascular	Yes	1/1/2006	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37215	Transcatheter placement of intravascular stent(s), cervical carotid artery, open or percutaneous, including angioplasty, when performed, and radiological supervision and interpretation; with distal embolic protection	Cardiovascular	Yes	4/1/2006	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37217	Transcatheter placement of intravascular stent(s), intrathoracic common carotid artery or innominate artery by retrograde treatment, open ipsilateral cervical carotid artery exposure, including angioplasty, when performed, and radiological supervision and interpretation	Cardiovascular	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37218	Transcatheter placement of intravascular stent(s), intrathoracic common carotid artery or innominate artery, open or percutaneous antegrade approach, including angioplasty, when performed, and radiological supervision and interpretation	Cardiovascular	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37236	Transcatheter placement of an intravascular stent(s) (except lower extremity artery(s) for occlusive disease, cervical carotid, extracranial vertebral or intrathoracic carotid, intracranial, or coronary), open or percutaneous, including radiological supervision and interpretation and including all angioplasty within the same vessel, when performed; initial artery	Cardiovascular	Yes	1/1/2016	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37238	Transcatheter Placement of An Intravascular Stent(S), Open or Percutaneous, including Radiological Supervision and Interpretation and including Angioplasty within the Same Vessel, when Performed; initial Vein	Cardiovascular	Yes	1/1/2016	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33017	Pericardial drainage with insertion of indwelling catheter, percutaneous, including fluoroscopy and/or ultrasound guidance, when performed; 6 years and older without congenital cardiac anomaly	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33018	Pericardial drainage with insertion of indwelling catheter, percutaneous, including fluoroscopy and/or ultrasound guidance, when performed; birth through 5 years of age or any age with congenital cardiac anomaly	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33019	Pericardial drainage with insertion of indwelling catheter, percutaneous, including CT guidance	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33020	Pericardiectomy for removal of clot or foreign body (primary procedure)	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33025	Creation of pericardial window or partial resection for drainage	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33030	Pericardiectomy, subtotal or complete; without cardiopulmonary bypass	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33031	Pericardiectomy, subtotal or complete; with cardiopulmonary bypass	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33050	Resection of pericardial cyst or tumor	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33120	Excision of Intracardiac Tumor, Resection with Cardiopulmonary Bypass	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33130	Resection of External Cardiac Tumor	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33361	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; percutaneous femoral artery approach	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33362	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; open femoral artery approach	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33363	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; open axillary artery approach	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33364	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; open iliac artery approach	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33365	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; transaortic approach (eg, median sternotomy, mediastinotomy)	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33366	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; transapical exposure (eg, left thoracotomy)	Cardiovascular	Yes	1/1/2014	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33367	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; cardiopulmonary bypass support with percutaneous peripheral arterial and venous cannulation (eg, femoral vessels) (List separately in addition to code for primary procedure)	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33368	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; cardiopulmonary bypass support with open peripheral arterial and venous cannulation (eg, femoral, iliac, axillary vessels) (List separately in addition to code for primary procedure)	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33369	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; cardiopulmonary bypass support with central arterial and venous cannulation (eg, aorta, right atrium, pulmonary artery) (List separately in addition to code for primary procedure)	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33370	Transcatheter placement and subsequent removal of cerebral embolic protection device(s), including arterial access, catheterization, imaging, and radiological supervision and interpretation, percutaneous (List separately in addition to code for primary procedure)	Cardiovascular	Yes	1/1/2022	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33390	Valvuloplasty, aortic valve, open, with cardiopulmonary bypass; simple (ie, valvotomy, debridement, debulking, and/or simple commissural resuspension)	Cardiovascular	Yes	1/1/2017	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33391	Valvuloplasty, aortic valve, open, with cardiopulmonary bypass; complex (eg, leaflet extension, leaflet resection, leaflet reconstruction, or annuloplasty)	Cardiovascular	Yes	1/1/2017	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33404	Construction of Apical-Aortic Conduit	Cardiovascular	Yes	7/1/2004	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33405	Replacement, aortic valve, open, with cardiopulmonary bypass; with prosthetic valve other than homograft or stentless valve	Cardiovascular	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33406	Replacement, aortic valve, open, with cardiopulmonary bypass; with allograft valve (freehand)	Cardiovascular	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33410	Replacement, aortic valve, open, with cardiopulmonary bypass; with stentless tissue valve	Cardiovascular	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33411	Replacement, aortic valve; with aortic annulus enlargement, noncoronary sinus	Cardiovascular	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33412	Replacement, aortic valve; with transventricular aortic annulus enlargement (Konno procedure)	Cardiovascular	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33413	Replacement, aortic valve; by translocation of autologous pulmonary valve with allograft replacement of pulmonary valve (Ross procedure)	Cardiovascular	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33414	Repair of left ventricular outflow tract obstruction by patch enlargement of the outflow tract	Cardiovascular	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33415	Resection or incision of subvalvular tissue for discrete subvalvular aortic stenosis	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33416	Ventriculomyotomy (-myectomy) for idiopathic hypertrophic subaortic stenosis (eg, asymmetric septal hypertrophy)	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33417	Aortoplasty (gusset) for supravalvular stenosis	Cardiovascular	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33418	Transcatheter mitral valve repair, percutaneous approach, including transseptal puncture when performed; initial prosthesis	Cardiovascular	Yes	1/1/2015	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33419	Transcatheter mitral valve repair, percutaneous approach, including transseptal puncture when performed; additional prosthesis(es) during same session (List separately in addition to code for primary procedure)	Cardiovascular	Yes	1/1/2015	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33420	Valvotomy, Mitral Valve; Closed Heart	Cardiovascular	Yes	4/1/1997	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33422	Valvotomy, mitral valve; open heart, with cardiopulmonary bypass	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33425	Valvuloplasty, mitral valve, with cardiopulmonary bypass;	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33426	Valvuloplasty, mitral valve, with cardiopulmonary bypass; with prosthetic ring	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33427	Valvuloplasty, mitral valve, with cardiopulmonary bypass; radical reconstruction, with or without ring	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33430	Replacement, Mitral Valve, with Cardiopulmonary Bypass	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33440	Replacement, aortic valve; by translocation of autologous pulmonary valve and transventricular aortic annulus enlargement of the left ventricular outflow tract with valved conduit replacement of pulmonary valve (Ross-Konno procedure)	Cardiovascular	Yes	1/1/2019	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33460	Valvectomy, Tricuspid Valve, with Cardiopulmonary Bypass	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33463	Valvuloplasty, tricuspid valve; without ring insertion	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33464	Valvuloplasty, tricuspid valve; with ring insertion	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33465	Replacement, Tricuspid Valve, with Cardiopulmonary Bypass	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33468	Tricuspid valve repositioning and plication for Ebstein anomaly	Cardiovascular	Yes	4/1/1997	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33474	Valvotomy, Pulmonary Valve, Open Heart, with Cardiopulmonary Bypass	Cardiovascular	Yes	4/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33475	Replacement, Pulmonary Valve	Cardiovascular	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33476	Right ventricular resection for infundibular stenosis, with or without commissurotomy	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33477	Transcatheter pulmonary valve implantation, percutaneous approach, including pre-stenting of the valve delivery site, when performed	Cardiovascular	Yes	1/1/2016	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33478	Outflow tract augmentation (gusset), with or without commissurotomy or infundibular resection	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33496	Repair of non-structural prosthetic valve dysfunction with cardiopulmonary bypass (separate procedure)	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33500	Repair of coronary arteriovenous or arteriocardiac chamber fistula; with cardiopulmonary bypass	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33501	Repair of coronary arteriovenous or arteriocardiac chamber fistula; without cardiopulmonary bypass	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33502	Repair of anomalous coronary artery from pulmonary artery origin; by ligation	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33503	Repair of anomalous coronary artery from pulmonary artery origin; by graft, without cardiopulmonary bypass	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33504	Repair of anomalous coronary artery from pulmonary artery origin; by graft, with cardiopulmonary bypass	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33505	Repair of anomalous coronary artery from pulmonary artery origin; with construction of intrapulmonary artery tunnel (Takeuchi procedure)	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33506	Repair of anomalous coronary artery from pulmonary artery origin; by translocation from pulmonary artery to aorta	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33507	Repair of anomalous (eg, intramural) aortic origin of coronary artery by unroofing or translocation	Cardiovascular	Yes	1/1/2006	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33508	Endoscopy, surgical, including video-assisted harvest of vein(s) for coronary artery bypass procedure (List separately in addition to code for primary procedure)	Cardiovascular	Yes	1/1/2003	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33910	Pulmonary Artery Embolectomy; with Cardiopulmonary Bypass	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33915	Pulmonary Artery Embolectomy; without Cardiopulmonary Bypass	Cardiovascular	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33916	Pulmonary endarterectomy, with or without embolectomy, with cardiopulmonary bypass	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33917	Repair of pulmonary artery stenosis by reconstruction with patch or graft	Cardiovascular	Yes	1/1/2011	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33920	Repair of pulmonary atresia with ventricular septal defect, by construction or replacement of conduit from right or left ventricle to pulmonary artery	Cardiovascular	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33922	Transsection of pulmonary artery with cardiopulmonary bypass	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33924	Ligation and takedown of a systemic-to-pulmonary artery shunt, performed in conjunction with a congenital heart procedure (List separately in addition to code for primary procedure)	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33925	Repair of pulmonary artery arborization anomalies by unifocalization; without cardiopulmonary bypass	Cardiovascular	Yes	1/1/2006	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33926	Repair of pulmonary artery arborization anomalies by unifocalization; with cardiopulmonary bypass	Cardiovascular	Yes	1/1/2006	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93319	3D echocardiographic imaging and postprocessing during transesophageal echocardiography, or during transthoracic echocardiography for congenital cardiac anomalies, for the assessment of cardiac structure(s) (eg, cardiac chambers and valves, left atrial appendage, interatrial septum, interventricular septum) and function, when performed (List separately in addition to code for echocardiographic imaging)	Cardiovascular	Yes	1/1/2022	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93451	Right heart catheterization including measurement(s) of oxygen saturation and cardiac output, when performed	Cardiovascular	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93452	Left heart catheterization including intraprocedural injection(s) for left ventriculography, imaging supervision and interpretation, when performed	Cardiovascular	Yes	1/1/2017	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93453	Combined right and left heart catheterization including intraprocedural injection(s) for left ventriculography, imaging supervision and interpretation, when performed	Cardiovascular	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93454	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation;	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93455	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) including intraprocedural injection(s) for bypass graft angiography	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93456	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right heart catheterization	Cardiovascular	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93457	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) including intraprocedural injection(s) for bypass graft angiography and right heart catheterization	Cardiovascular	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93458	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed	Cardiovascular	Yes	1/1/2017	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93459	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography	Cardiovascular	Yes	1/1/2017	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93460	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right and left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed	Cardiovascular	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93461	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right and left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography	Cardiovascular	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93462	Left heart catheterization by transseptal puncture through intact septum or by transapical puncture (List separately in addition to code for primary procedure)	Cardiovascular	Yes	1/1/2017	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93503	Insertion and placement of flow directed catheter (eg, Swan-Ganz) for monitoring purposes	Cardiovascular	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93505	Endomyocardial Biopsy	Cardiovascular	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93568	Injection procedure during cardiac catheterization including imaging supervision, interpretation, and report; for pulmonary angiography (List separately in addition to code for primary procedure)	Cardiovascular	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93590	Percutaneous transcatheter closure of paravalvular leak; initial occlusion device, mitral valve	Cardiovascular	Yes	1/1/2017	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93591	Percutaneous transcatheter closure of paravalvular leak; initial occlusion device, aortic valve	Cardiovascular	Yes	1/1/2017	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	G0278	Iliac and/or Femoral Angiography at Time of Cath	Cardiovascular	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93320	Doppler echocardiography, pulsed wave and/or continuous wave with spectral display (List separately in addition to codes for echocardiographic imaging); complete	Echocardiography	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93325	Doppler echocardiography color flow velocity mapping (List separately in addition to codes for echocardiography)	Echocardiography	Yes	1/1/2014	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93350	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, during rest and cardiovascular stress test using treadmill, bicycle exercise and/or pharmacologically induced stress, with interpretation and report;	Echocardiography	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93351	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, during rest and cardiovascular stress test using treadmill, bicycle exercise and/or pharmacologically induced stress, with interpretation and report; including performance of continuous electrocardiographic monitoring, with supervision by a physician or other qualified health care professional	Echocardiography	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93303	Transthoracic echocardiography for congenital cardiac anomalies; complete	Echocardiography	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93304	Transthoracic echocardiography for congenital cardiac anomalies; follow-up or limited study	Echocardiography	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93306	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, with spectral Doppler echocardiography, and with color flow Doppler echocardiography	Echocardiography	Yes	1/1/2014	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93307	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Echocardiography	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93308	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, follow-up or limited study	Echocardiography	Yes	1/1/2014	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	78451	Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); single study, at rest or stress (exercise or pharmacologic)	Neuclear Cardiology	Yes	1/1/2010	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	78452	Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or stress (exercise or pharmacologic) and/or redistribution and/or rest reinjection	Neuclear Cardiology	Yes	1/1/2010	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	78453	Myocardial perfusion imaging, planar (including qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); single study, at rest or stress (exercise or pharmacologic)	Neuclear Cardiology	Yes	1/1/2010	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	78454	Myocardial perfusion imaging, planar (including qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or stress (exercise or pharmacologic) and/or redistribution and/or rest reinjection	Neuclear Cardiology	Yes	1/1/2010	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	78428	Cardiac shunt detection	Neuclear Cardiology	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	78466	Myocardial imaging, infarct avid, planar; qualitative or quantitative	Neuclear Cardiology	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	78468	Myocardial imaging, infarct avid, planar; with ejection fraction by first pass technique	Neuclear Cardiology	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	78469	Myocardial imaging, infarct avid, planar; tomographic SPECT with or without quantification	Neuclear Cardiology	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	78481	Cardiac blood pool imaging (planar), first pass technique; single study, at rest or with stress (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without quantification	Neuclear Cardiology	Yes	1/1/1998	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	78483	Cardiac blood pool imaging (planar), first pass technique; multiple studies, at rest and with stress (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without quantification	Neuclear Cardiology	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93268	External patient and, when performed, auto activated electrocardiographic rhythm derived event recording with symptom-related memory loop with remote download capability up to 30 days, 24-hour attended monitoring; includes transmission, review and interpretation by a physician or other qualified health care professional	CV Monitoring Services	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93270	External patient and, when performed, auto activated electrocardiographic rhythm derived event recording with symptom-related memory loop with remote download capability up to 30 days, 24-hour attended monitoring; recording (includes connection, recording, and disconnection)	CV Monitoring Services	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93271	External patient and, when performed, auto activated electrocardiographic rhythm derived event recording with symptom-related memory loop with remote download capability up to 30 days, 24-hour attended monitoring; transmission and analysis	CV Monitoring Services	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93272	External patient and, when performed, auto activated electrocardiographic rhythm derived event recording with symptom-related memory loop with remote download capability up to 30 days, 24-hour attended monitoring; review and interpretation by a physician or other qualified health care professional	CV Monitoring Services	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93228	External mobile cardiovascular telemetry with electrocardiographic recording, concurrent computerized real time data analysis and greater than 24 hours of accessible ECG data storage (retrievable with query) with ECG triggered and patient selected events transmitted to a remote attended surveillance center for up to 30 days; review and interpretation with report by a physician or other qualified health care professional	CV Monitoring Services	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93229	External mobile cardiovascular telemetry with electrocardiographic recording, concurrent computerized real time data analysis and greater than 24 hours of accessible ECG data storage (retrievable with query) with ECG triggered and patient selected events transmitted to a remote attended surveillance center for up to 30 days; technical support for connection and patient instructions for use, attended surveillance, analysis and transmission of daily and emergent data reports as prescribed by a physician or other qualified health care professional	CV Monitoring Services	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33340	Percutaneous transcatheter closure of the left atrial appendage with endocardial implant, including fluoroscopy, transseptal puncture, catheter placement(s), left atrial angiography, left atrial appendage angiography, when performed, and radiological supervision and interpretation	Device Implantation/Electrical Cardioversion	Yes	1/1/2017	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33270	Insertion or replacement of permanent subcutaneous implantable defibrillator system, with subcutaneous electrode, including defibrillation threshold evaluation, induction of arrhythmia, evaluation of sensing for arrhythmia termination, and programming or reprogramming of sensing or therapeutic parameters, when performed	Device Implantation/Electrical Cardioversion	Yes	1/1/2015	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33271	Insertion of subcutaneous implantable defibrillator electrode	Device Implantation/Electrical Cardioversion	Yes	1/1/2015	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33272	Removal of subcutaneous implantable defibrillator electrode	Device Implantation/Electrical Cardioversion	Yes	1/1/2015	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33273	Repositioning of previously implanted subcutaneous implantable defibrillator electrode	Device Implantation/Electrical Cardioversion	Yes	1/1/2015	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33274	Transcatheter insertion or replacement of permanent leadless pacemaker, right ventricular, including imaging guidance (eg, fluoroscopy, venous ultrasound, ventriculography, femoral venography) and device evaluation (eg, interrogation or programming), when performed	Device Implantation/Electrical Cardioversion	Yes	1/1/2019	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33275	Transcatheter removal of permanent leadless pacemaker, right ventricular, including imaging guidance (eg, fluoroscopy, venous ultrasound, ventriculography, femoral venography), when performed	Device Implantation/Electrical Cardioversion	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33285	Insertion, subcutaneous cardiac rhythm monitor, including programming	Device Implantation/Electrical Cardioversion	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33286	Removal, subcutaneous cardiac rhythm monitor	Device Implantation/Electrical Cardioversion	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33262	Removal of implantable defibrillator pulse generator with replacement of implantable defibrillator pulse generator; single lead system	Device Implantation/Electrical Cardioversion	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33263	Removal of implantable defibrillator pulse generator with replacement of implantable defibrillator pulse generator; dual lead system	Device Implantation/Electrical Cardioversion	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33264	Removal of implantable defibrillator pulse generator with replacement of implantable defibrillator pulse generator; multiple lead system	Device Implantation/Electrical Cardioversion	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33206	Insertion of new or replacement of permanent pacemaker with transvenous electrode(s); atrial	Device Implantation/Electrical Cardioversion	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33207	Insertion of new or replacement of permanent pacemaker with transvenous electrode(s); ventricular	Device Implantation/Electrical Cardioversion	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33208	Insertion of new or replacement of permanent pacemaker with transvenous electrode(s); atrial and ventricular	Device Implantation/Electrical Cardioversion	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33210	Insertion or replacement of temporary transvenous single chamber cardiac electrode or pacemaker catheter (separate procedure)	Device Implantation/Electrical Cardioversion	Yes	10/1/2012	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33211	Insertion or replacement of temporary transvenous dual chamber pacing electrodes (separate procedure)	Device Implantation/Electrical Cardioversion	Yes	10/1/2012	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33212	Insertion of Pacemaker Pulse Generator Only; with Existing single Lead	Device Implantation/Electrical Cardioversion	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33213	Insertion of Pacemaker Pulse Generator Only; with Existing Dual Leads	Device Implantation/Electrical Cardioversion	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33214	Upgrade of implanted pacemaker system, conversion of single chamber system to dual chamber system (includes removal of previously placed pulse generator, testing of existing lead, insertion of new lead, insertion of new pulse generator)	Device Implantation/Electrical Cardioversion	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33216	Insertion of a single transvenous electrode, permanent pacemaker or implantable defibrillator	Device Implantation/Electrical Cardioversion	Yes	1/1/2015	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33217	Insertion of 2 transvenous electrodes, permanent pacemaker or implantable defibrillator	Device Implantation/Electrical Cardioversion	Yes	1/1/2015	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33221	Insertion of Pacemaker Pulse Generator Only; with Existing Multiple Leads	Device Implantation/Electrical Cardioversion	Yes	1/1/2012	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33224	Insertion of pacing electrode, cardiac venous system, for left ventricular pacing, with attachment to previously placed pacemaker or implantable defibrillator pulse generator (including revision of pocket, removal, insertion, and/or replacement of existing generator)	Device Implantation/Electrical Cardioversion	Yes	7/1/2003	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33225	Insertion of pacing electrode, cardiac venous system, for left ventricular pacing, at time of insertion of implantable defibrillator or pacemaker pulse generator (eg, for upgrade to dual chamber system) (List separately in addition to code for primary procedure)	Device Implantation/Electrical Cardioversion	Yes	1/1/2003	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33230	Insertion of implantable defibrillator pulse generator only; with existing dual leads	Device Implantation/Electrical Cardioversion	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33231	Insertion of implantable defibrillator pulse generator only; with existing multiple leads	Device Implantation/Electrical Cardioversion	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33236	Removal of permanent epicardial pacemaker and electrodes by thoracotomy; single lead system, atrial or ventricular	Device Implantation/Electrical Cardioversion	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33237	Removal of permanent epicardial pacemaker and electrodes by thoracotomy; dual lead system	Device Implantation/Electrical Cardioversion	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33238	Removal of permanent transvenous electrode(s) by thoracotomy	Device Implantation/Electrical Cardioversion	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33240	Insertion of implantable defibrillator pulse generator only; with existing single lead	Device Implantation/Electrical Cardioversion	Yes	1/1/2013	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33241	Removal of implantable defibrillator pulse generator only	Device Implantation/Electrical Cardioversion	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33243	Removal of single or dual chamber implantable defibrillator electrode(s); by thoracotomy	Device Implantation/Electrical Cardioversion	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33244	Removal of single or dual chamber implantable defibrillator electrode(s); by transvenous extraction	Device Implantation/Electrical Cardioversion	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33249	Insertion or replacement of permanent implantable defibrillator system, with transvenous lead(s), single or dual chamber	Device Implantation/Electrical Cardioversion	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	75565	Cardiac Magnetic Resonance Imaging for Velocity Flow Mapping (List Separately In addition To Code for Primary Procedure)	Cardiac CT-MRI-PET	Yes	1/1/2010	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	78429	Myocardial imaging, positron emission tomography (PET), metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), single study; with concurrently acquired computed tomography transmission scan	Cardiac CT-MRI-PET	Yes	1/1/2020	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	78430	Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion[s] and/or ejection fraction[s], when performed); single study, at rest or stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan	Cardiac CT-MRI-PET	Yes	1/1/2020	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	78431	Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion[s] and/or ejection fraction[s], when performed); multiple studies at rest and stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan	Cardiac CT-MRI-PET	Yes	1/1/2020	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	78432	Myocardial imaging, positron emission tomography (PET), combined perfusion with metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), dual radiotracer (eg, myocardial viability);	Cardiac CT-MRI-PET	Yes	1/1/2020	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	78433	Myocardial imaging, positron emission tomography (PET), combined perfusion with metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), dual radiotracer (eg, myocardial viability); with concurrently acquired computed tomography transmission scan	Cardiac CT-MRI-PET	Yes	1/1/2020	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	75580	Noninvasive estimate of coronary fractional flow reserve (FFR) derived from augmentative software analysis of the data set from a coronary computed tomography angiography, with interpretation and report by a physician or other qualified health care professional	Cardiac CT-MRI-PET	Yes	1/1/2024	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	75625	Aortography, abdominal, by serialography, radiological supervision and interpretation	Diagnostic Radiology	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	75630	Aortography, abdominal plus bilateral iliofemoral lower extremity, catheter, by serialography, radiological supervision and interpretation	Diagnostic Radiology	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	75710	Angiography, extremity, unilateral, radiological supervision and interpretation	Diagnostic Radiology	Yes	1/1/1999	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	75716	Angiography, extremity, bilateral, radiological supervision and interpretation	Diagnostic Radiology	Yes	1/1/1999	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	75726	Angiography, visceral, selective or supraseductive (with or without flush aortogram), radiological supervision and interpretation	Diagnostic Radiology	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	75736	Angiography, pelvic, selective or supraseductive, radiological supervision and interpretation	Diagnostic Radiology	Yes	6/1/2016	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	75820	Venography, Extremity, Unilateral, Radiological Supervision and Interpretation	Diagnostic Radiology	Yes	1/1/1999	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	75822	Venography, extremity, bilateral, radiological supervision and interpretation	Diagnostic Radiology	Yes	6/1/2016	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	75825	Venography, caval, inferior, with serialography, radiological supervision and interpretation	Diagnostic Radiology	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	75827	Venography, caval, superior, with serialography, radiological supervision and interpretation	Diagnostic Radiology	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	75860	Venography, venous sinus (eg, petrosal and inferior sagittal) or jugular, catheter, radiological supervision and interpretation	Diagnostic Radiology	Yes	7/1/2003	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	75898	Angiography through existing catheter for follow-up study for transcatheter therapy, embolization or infusion, other than for thrombolysis	Diagnostic Radiology	Yes	1/1/2007	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93880	Duplex scan of extracranial arteries; complete bilateral study	Cerebrovascular Arterial	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93882	Duplex scan of extracranial arteries; unilateral or limited study	Cerebrovascular Arterial	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93925	Duplex scan of lower extremity arteries or arterial bypass grafts; complete bilateral study	Extremity Arterial	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93926	Duplex scan of lower extremity arteries or arterial bypass grafts; unilateral or limited study	Extremity Arterial	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93930	Duplex scan of upper extremity arteries or arterial bypass grafts; complete bilateral study	Extremity Arterial	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93931	Duplex scan of upper extremity arteries or arterial bypass grafts; unilateral or limited study	Extremity Arterial	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	78459	Myocardial imaging, positron emission tomography (PET), metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), single study;	Non Invasive Cardiology	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	75571	Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium	Non Invasive Cardiology	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	75572	Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology (including 3D image postprocessing, assessment of cardiac function, and evaluation of venous structures, if performed)	Non Invasive Cardiology	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	75573	Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology in the setting of congenital heart disease (including 3D image postprocessing, assessment of left ventricular [LV] cardiac function, right ventricular [RV] structure and function and evaluation of vascular structures, if performed)	Non Invasive Cardiology	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	75574	Computed tomographic angiography, heart, coronary arteries and bypass grafts (when present), with contrast material, including 3D image postprocessing (including evaluation of cardiac structure and morphology, assessment of cardiac function, and evaluation of venous structures, if performed)	Non Invasive Cardiology	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	75557	Cardiac magnetic resonance imaging for morphology and function without contrast material;	Non Invasive Cardiology	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	75559	Cardiac magnetic resonance imaging for morphology and function without contrast material; with stress imaging	Non Invasive Cardiology	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	75561	Cardiac magnetic resonance imaging for morphology and function without contrast material(s), followed by contrast material(s) and further sequences;	Non Invasive Cardiology	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	75563	Cardiac magnetic resonance imaging for morphology and function without contrast material(s), followed by contrast material(s) and further sequences; with stress imaging	Non Invasive Cardiology	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	78491	Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion[s] and/or ejection fraction[s], when performed); single study, at rest or stress (exercise or pharmacologic)	Non Invasive Cardiology	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	78492	Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion[s] and/or ejection fraction[s], when performed); multiple studies at rest and stress (exercise or pharmacologic)	Non Invasive Cardiology	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36838	Distal revascularization and interval ligation (DRIL), upper extremity hemodialysis access (steal syndrome)	Surgery	Yes	1/1/2008	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36860	External Cannula Declotting (Separate Procedure); without Balloon Catheter	Surgery	Yes	1/1/2015	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36861	External Cannula Declotting (Separate Procedure); with Balloon Catheter	Surgery	Yes	1/1/2015	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37618	Ligation, major artery (eg, post-traumatic, rupture); extremity	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37660	Ligation of common iliac vein	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37700	Ligation and division of long saphenous vein at saphenofemoral junction, or distal interruptions	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37718	Ligation, division, and stripping, short saphenous vein	Surgery	Yes	1/1/2006	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37722	Ligation, division, and stripping, long (greater) saphenous veins from saphenofemoral junction to knee or below	Surgery	Yes	1/1/2006	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37735	Ligation and division and complete stripping of long or short saphenous veins with radical excision of ulcer and skin graft and/or interruption of communicating veins of lower leg, with excision of deep fascia	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37760	Ligation of perforator veins, subfascial, radical (Linton type), including skin graft, when performed, open, 1 leg	Surgery	Yes	4/1/2001	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37761	Ligation of perforator vein(s), subfascial, open, including ultrasound guidance, when performed, 1 leg	Surgery	Yes	7/1/2011	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37765	Stab phlebectomy of varicose veins, 1 extremity; 10-20 stab incisions	Surgery	Yes	7/1/2004	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37766	Stab phlebectomy of varicose veins, 1 extremity; more than 20 incisions	Surgery	Yes	7/1/2004	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37780	Ligation and division of short saphenous vein at saphenopopliteal junction (separate procedure)	Surgery	Yes	1/1/2006	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	37785	Ligation, division, and/or excision of varicose vein cluster(s), 1 leg	Surgery	Yes	4/1/2011	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	38746	Thoracic lymphadenectomy by thoracotomy, mediastinal and regional lymphadenectomy (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/1997	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	39000	Mediastinotomy with exploration, drainage, removal of foreign body, or biopsy; cervical approach	Surgery	Yes	4/1/2010	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	39010	Mediastinotomy with exploration, drainage, removal of foreign body, or biopsy; transthoracic approach, including either transthoracic or median sternotomy	Surgery	Yes	4/1/2010	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	39200	Resection of mediastinal cyst	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	39220	Resection of mediastinal tumor	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36465	Injection of non-compounded foam sclerosant with ultrasound compression maneuvers to guide dispersion of the injectate, inclusive of all imaging guidance and monitoring; single incompetent extremity truncal vein (eg, great saphenous vein, accessory saphenous vein)	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36466	Injection of non-compounded foam sclerosant with ultrasound compression maneuvers to guide dispersion of the injectate, inclusive of all imaging guidance and monitoring; multiple incompetent truncal veins (eg, great saphenous vein, accessory saphenous vein), same leg	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36470	Injection of sclerosant; single incompetent vein (other than telangiectasia)	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36471	Injection of sclerosant; multiple incompetent veins (other than telangiectasia), same leg	Surgery	Yes	10/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36473	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, mechanochemical; first vein treated	Surgery	Yes	1/1/2017	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36474	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, mechanochemical; subsequent vein(s) treated in a single extremity, each through separate access sites (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/2017	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36475	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, radiofrequency; first vein treated	Surgery	Yes	4/1/2014	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36476	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, radiofrequency; subsequent vein(s) treated in a single extremity, each through separate access sites (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/2017	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36478	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, laser; first vein treated	Surgery	Yes	4/1/2014	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36479	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, laser; subsequent vein(s) treated in a single extremity, each through separate access sites (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/2017	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36482	Endovenous ablation therapy of incompetent vein, extremity, by transcatheter delivery of a chemical adhesive (eg, cyanoacrylate) remote from the access site, inclusive of all imaging guidance and monitoring, percutaneous; first vein treated	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36483	Endovenous ablation therapy of incompetent vein, extremity, by transcatheter delivery of a chemical adhesive (eg, cyanoacrylate) remote from the access site, inclusive of all imaging guidance and monitoring, percutaneous; subsequent vein(s) treated in a single extremity, each through separate access sites (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36800	Insertion of cannula for hemodialysis, other purpose (separate procedure); vein to vein	Surgery	Yes	1/1/2015	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36810	Insertion of cannula for hemodialysis, other purpose (separate procedure); arteriovenous, external (Scribner type)	Surgery	Yes	1/1/2015	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36815	Insertion of cannula for hemodialysis, other purpose (separate procedure); arteriovenous, external revision, or closure	Surgery	Yes	1/1/2015	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36835	Insertion of Thomas shunt (separate procedure)	Surgery	Yes	1/1/2015	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	33509	Harvest of upper extremity artery, 1 segment, for coronary artery bypass procedure, endoscopic	Surgery	Yes	1/1/2022	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	21602	Excision of chest wall tumor involving rib(s), with plastic reconstruction; without mediastinal lymphadenectomy	Surgery	Yes	1/1/2008	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	21603	Excision of chest wall tumor involving rib(s), with plastic reconstruction; with mediastinal lymphadenectomy	Surgery	Yes	1/1/2008	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	21620	Osteotomy of sternum, partial	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	21627	Sternal Debridement	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	21630	Radical resection of sternum	Surgery	Yes	1/1/1997	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	21750	Closure of median sternotomy separation with or without debridement (separate procedure)	Surgery	Yes	1/1/1997	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32035	Thoracostomy; with Rib Resection for Empyema	Surgery	Yes	1/1/1997	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32036	Thoracostomy; with Open Flap Drainage for Empyema	Surgery	Yes	1/1/1997	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32096	Thoracotomy, with diagnostic biopsy(ies) of lung infiltrate(s) (eg, wedge, incisional), unilateral	Surgery	Yes	1/1/2012	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32097	Thoracotomy, with diagnostic biopsy(ies) of lung nodule(s) or mass(es) (eg, wedge, incisional), unilateral	Surgery	Yes	1/1/2012	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32098	Thoracotomy, with biopsy(ies) of pleura	Surgery	Yes	1/1/2012	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32100	Thoracotomy; with exploration	Surgery	Yes	1/1/2006	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32110	Thoracotomy; with control of traumatic hemorrhage and/or repair of lung tear	Surgery	Yes	10/1/2017	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32120	Thoracotomy; for Postoperative Complications	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32124	Thoracotomy; with open intrapleural pneumonolysis	Surgery	Yes	10/1/2017	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32140	Thoracotomy; with cyst(s) removal, includes pleural procedure when performed	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32141	Thoracotomy; with resection-plication of bullae, includes any pleural procedure when performed	Surgery	Yes	10/1/2017	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32150	Thoracotomy; with Removal of Intrapleural foreign Body or Fibrin Deposit	Surgery	Yes	10/1/2017	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32151	Thoracotomy; with removal of intrapulmonary foreign body	Surgery	Yes	10/1/2017	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32160	Thoracotomy; with Cardiac Massage	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32200	Pneumonostomy, with open drainage of abscess or cyst	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32215	Pleural Scarification for Repeat Pneumothorax	Surgery	Yes	4/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32220	Decortication, Pulmonary (Separate Procedure); Total	Surgery	Yes	1/1/1997	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32225	Decortication, Pulmonary (Separate Procedure); Partial	Surgery	Yes	1/1/1997	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32440	Removal of lung, pneumonectomy;	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32442	Removal of lung, pneumonectomy; with resection of segment of trachea followed by broncho-tracheal anastomosis (sleeve pneumonectomy)	Surgery	Yes	1/1/1997	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32445	Removal of lung, pneumonectomy; extrapleural	Surgery	Yes	1/1/1997	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32480	Removal of lung, other than pneumonectomy; single lobe (lobectomy)	Surgery	Yes	10/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32482	Removal of lung, other than pneumonectomy; 2 lobes (bilobectomy)	Surgery	Yes	10/1/1996	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32484	Removal of lung, other than pneumonectomy; single segment (segmentectomy)	Surgery	Yes	10/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32486	Removal of lung, other than pneumonectomy; with circumferential resection of segment of bronchus followed by broncho-bronchial anastomosis (sleeve lobectomy)	Surgery	Yes	1/1/1997	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32488	Removal of lung, other than pneumonectomy; with all remaining lung following previous removal of a portion of lung (completion pneumonectomy)	Surgery	Yes	1/1/1997	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32491	Removal of lung, other than pneumonectomy; with resection-plication of emphysematous lung(s) (bullous or non-bullous) for lung volume reduction, sternal split or transthoracic approach, includes any pleural procedure, when performed	Surgery	Yes	10/1/2003	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32501	Resection and repair of portion of bronchus (bronchoplasty) when performed at time of lobectomy or segmentectomy (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32503	Resection of apical lung tumor (eg, Pancoast tumor), including chest wall resection, rib(s) resection(s), neurovascular dissection, when performed; without chest wall reconstruction(s)	Surgery	Yes	1/1/2006	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32504	Resection of apical lung tumor (eg, Pancoast tumor), including chest wall resection, rib(s) resection(s), neurovascular dissection, when performed; with chest wall reconstruction	Surgery	Yes	1/1/2006	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32505	Thoracotomy; with therapeutic wedge resection (eg, mass, nodule), initial	Surgery	Yes	1/1/2012	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32506	Thoracotomy; with therapeutic wedge resection (eg, mass or nodule), each additional resection, ipsilateral (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/2012	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32507	Thoracotomy; with diagnostic wedge resection followed by anatomic lung resection (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/2012	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32540	Extrapleural Enucleation of Empyema (Empyemectomy)	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32650	Thoracoscopy, Surgical; with Pleurodesis (Eg, Mechanical or Chemical)	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32651	Thoracoscopy, surgical; with partial pulmonary decortication	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32652	Thoracoscopy, surgical; with total pulmonary decortication, including intrapleural pneumonolysis	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32653	Thoracoscopy, Surgical; with Removal of Intrapleural foreign Body or Fibrin Deposit	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32654	Thoracoscopy, Surgical; with Control of Traumatic Hemorrhage	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32655	Thoracoscopy, surgical; with resection-plication of bullae, includes any pleural procedure when performed	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32656	Thoracoscopy, Surgical; with Parietal Pleurectomy	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32658	Thoracoscopy, surgical; with removal of clot or foreign body from pericardial sac	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32659	Thoracoscopy, surgical; with creation of pericardial window or partial resection of pericardial sac for drainage	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32661	Thoracoscopy, surgical; with excision of pericardial cyst, tumor, or mass	Surgery	Yes	7/1/2012	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32662	Thoracoscopy, surgical; with excision of mediastinal cyst, tumor, or mass	Surgery	Yes	1/1/2012	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32663	Thoracoscopy, surgical; with lobectomy (single lobe)	Surgery	Yes	1/1/2012	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32664	Thoracoscopy, surgical; with thoracic sympathectomy	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32665	Thoracoscopy, surgical; with esophagomyotomy (Heller type)	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32666	Thoracoscopy, surgical; with therapeutic wedge resection (eg, mass, nodule), initial unilateral	Surgery	Yes	1/1/2012	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32667	Thoracoscopy, surgical; with therapeutic wedge resection (eg, mass or nodule), each additional resection, ipsilateral (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/2012	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32668	Thoracoscopy, surgical; with diagnostic wedge resection followed by anatomic lung resection (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/2012	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32669	Thoracoscopy, Surgical; with Removal of a single Lung Segment (Segmentectomy)	Surgery	Yes	1/1/2012	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32670	Thoracoscopy, surgical; with removal of two lobes (bilobectomy)	Surgery	Yes	1/1/2012	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32671	Thoracoscopy, Surgical; with Removal of Lung (Pneumonectomy)	Surgery	Yes	1/1/2012	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32672	Thoracoscopy, surgical; with resection-plication for emphysematous lung (bullous or non-bullous) for lung volume reduction (LVRS), unilateral includes any pleural procedure, when performed	Surgery	Yes	1/1/2012	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32673	Thoracoscopy, Surgical; with Resection of Thymus, Unilateral or Bilateral	Surgery	Yes	1/1/2012	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32674	Thoracoscopy, surgical; with mediastinal and regional lymphadenectomy (List separately in addition to code for primary procedure)	Surgery	Yes	7/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32800	Repair Lung Hernia Through Chest Wall	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32810	Closure of chest wall following open flap drainage for empyema (Clagett type procedure)	Surgery	Yes	4/1/1997	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32815	Open Closure of Major Bronchial Fistula	Surgery	Yes	10/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32820	Major Reconstruction, Chest Wall (Posttraumatic)	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32900	Resection of Ribs, Extrapleural, all Stages	Surgery	Yes	10/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32905	Thoracoplasty, Schede type or extrapleural (all stages);	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32906	Thoracoplasty, Schede type or extrapleural (all stages); with closure of bronchopleural fistula	Surgery	Yes	10/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32940	Pneumonolysis, Extraperiosteal, including Filling or Packing Procedures	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	32997	Total Lung Lavage (Unilateral)	Surgery	Yes	7/1/2001	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34001	Embolectomy or thrombectomy, with or without catheter; carotid, subclavian or innominate artery, by neck incision	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34051	Embolectomy or thrombectomy, with or without catheter; innominate, subclavian artery, by thoracic incision	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34101	Embolectomy or thrombectomy, with or without catheter; axillary, brachial, innominate, subclavian artery, by arm incision	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34111	Embolectomy or thrombectomy, with or without catheter; radial or ulnar artery, by arm incision	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34151	Embolectomy or thrombectomy, with or without catheter; renal, celiac, mesentery, aortiliac artery, by abdominal incision	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34201	Embolectomy or thrombectomy, with or without catheter; femoropopliteal, aortiliac artery, by leg incision	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34203	Embolectomy or thrombectomy, with or without catheter; popliteal-tibio-peroneal artery, by leg incision	Surgery	Yes	1/1/1997	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34401	Thrombectomy, direct or with catheter; vena cava, iliac vein, by abdominal incision	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34421	Thrombectomy, direct or with catheter; vena cava, iliac, femoropopliteal vein, by leg incision	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34451	Thrombectomy, direct or with catheter; vena cava, iliac, femoropopliteal vein, by abdominal and leg incision	Surgery	Yes	6/5/2000	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34471	Thrombectomy, direct or with catheter; subclavian vein, by neck incision	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34490	Thrombectomy, direct or with catheter; axillary and subclavian vein, by arm incision	Surgery	Yes	6/5/2000	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34501	Valvuloplasty, femoral vein	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34502	Reconstruction of Vena Cava, any Method	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34510	Venous Valve Transposition, any vein donor	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34520	Cross-Over Vein Graft To Venous System	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34530	Saphenopopliteal Vein Anastomosis	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34701	Endovascular repair of infrarenal aorta by deployment of an aorto-aortic tube endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, all endograft extension(s) placed in the aorta from the level of the renal arteries to the aortic bifurcation, and all angioplasty/stenting performed from the level of the renal arteries to the aortic bifurcation; for other than rupture (eg, for aneurysm, pseudoaneurysm, dissection, penetrating ulcer)	Surgery	Yes	1/1/2018	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34702	Endovascular repair of infrarenal aorta by deployment of an aorto-aortic tube endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, all endograft extension(s) placed in the aorta from the level of the renal arteries to the aortic bifurcation, and all angioplasty/stenting performed from the level of the renal arteries to the aortic bifurcation; for rupture including temporary aortic and/or iliac balloon occlusion, when performed (eg, for aneurysm, pseudoaneurysm, dissection, penetrating ulcer, traumatic disruption)	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34703	Endovascular repair of infrarenal aorta and/or iliac artery(ies) by deployment of an aorto-uni-iliac endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, all endograft extension(s) placed in the aorta from the level of the renal arteries to the iliac bifurcation, and all angioplasty/stenting performed from the level of the renal arteries to the iliac bifurcation; for other than rupture (eg, for aneurysm, pseudoaneurysm, dissection, penetrating ulcer)	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34704	Endovascular repair of infrarenal aorta and/or iliac artery(ies) by deployment of an aorto-uni-iliac endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, all endograft extension(s) placed in the aorta from the level of the renal arteries to the iliac bifurcation, and all angioplasty/stenting performed from the level of the renal arteries to the iliac bifurcation; for rupture including temporary aortic and/or iliac balloon occlusion, when performed (eg, for aneurysm, pseudoaneurysm, dissection, penetrating ulcer, traumatic disruption)	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34705	Endovascular repair of infrarenal aorta and/or iliac artery(ies) by deployment of an aorto-bi-iliac endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, all endograft extension(s) placed in the aorta from the level of the renal arteries to the iliac bifurcation, and all angioplasty/stenting performed from the level of the renal arteries to the iliac bifurcation; for other than rupture (eg, for aneurysm, pseudoaneurysm, dissection, penetrating ulcer)	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34706	Endovascular repair of infrarenal aorta and/or iliac artery(ies) by deployment of an aorto-bi-iliac endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, all endograft extension(s) placed in the aorta from the level of the renal arteries to the iliac bifurcation, and all angioplasty/stenting performed from the level of the renal arteries to the iliac bifurcation; for rupture including temporary aortic and/or iliac balloon occlusion, when performed (eg, for aneurysm, pseudoaneurysm, dissection, penetrating ulcer, traumatic disruption)	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34707	Endovascular repair of iliac artery by deployment of an ilio-iliac tube endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, and all endograft extension(s) proximally to the aortic bifurcation and distally to the iliac bifurcation, and treatment zone angioplasty/stenting, when performed, unilateral; for other than rupture (eg, for aneurysm, pseudoaneurysm, dissection, arteriovenous malformation)	Surgery	Yes	1/1/2018	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34708	Endovascular repair of iliac artery by deployment of an ilio-iliac tube endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, and all endograft extension(s) proximally to the aortic bifurcation and distally to the iliac bifurcation, and treatment zone angioplasty/stenting, when performed, unilateral; for rupture including temporary aortic and/or iliac balloon occlusion, when performed (eg, for aneurysm, pseudoaneurysm, dissection, arteriovenous malformation, traumatic disruption)	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34709	Placement of extension prosthesis(es) distal to the common iliac artery(ies) or proximal to the renal artery(ies) for endovascular repair of infrarenal abdominal aortic or iliac aneurysm, false aneurysm, dissection, penetrating ulcer, including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, and treatment zone angioplasty/stenting, when performed, per vessel treated (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34710	Delayed placement of distal or proximal extension prosthesis for endovascular repair of infrarenal abdominal aortic or iliac aneurysm, false aneurysm, dissection, endoleak, or endograft migration, including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, and treatment zone angioplasty/stenting, when performed; initial vessel treated	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34711	Delayed placement of distal or proximal extension prosthesis for endovascular repair of infrarenal abdominal aortic or iliac aneurysm, false aneurysm, dissection, endoleak, or endograft migration, including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, and treatment zone angioplasty/stenting, when performed; each additional vessel treated (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34712	Transcatheter delivery of enhanced fixation device(s) to the endograft (eg, anchor, screw, tack) and all associated radiological supervision and interpretation	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34713	Percutaneous access and closure of femoral artery for delivery of endograft through a large sheath (12 French or larger), including ultrasound guidance, when performed, unilateral (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34714	Open femoral artery exposure with creation of conduit for delivery of endovascular prosthesis or for establishment of cardiopulmonary bypass, by groin incision, unilateral (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34715	Open axillary/subclavian artery exposure for delivery of endovascular prosthesis by infraclavicular or supraclavicular incision, unilateral (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34716	Open axillary/subclavian artery exposure with creation of conduit for delivery of endovascular prosthesis or for establishment of cardiopulmonary bypass, by infraclavicular or supraclavicular incision, unilateral (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/2018	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34717	Endovascular repair of iliac artery at the time of aorto-iliac artery endograft placement by deployment of an iliac branched endograft including pre-procedure sizing and device selection, all ipsilateral selective iliac artery catheterization(s), all associated radiological supervision and interpretation, and all endograft extension(s) proximally to the aortic bifurcation and distally in the internal iliac, external iliac, and common femoral artery(ies), and treatment zone angioplasty/stenting, when performed, for rupture or other than rupture (eg, for aneurysm, pseudoaneurysm, dissection, arteriovenous malformation, penetrating ulcer, traumatic disruption), unilateral (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/2020	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34718	Endovascular repair of iliac artery, not associated with placement of an aorto-iliac artery endograft at the same session, by deployment of an iliac branched endograft, including pre-procedure sizing and device selection, all ipsilateral selective iliac artery catheterization(s), all associated radiological supervision and interpretation, and all endograft extension(s) proximally to the aortic bifurcation and distally in the internal iliac, external iliac, and common femoral artery(ies), and treatment zone angioplasty/stenting, when performed, for other than rupture (eg, for aneurysm, pseudoaneurysm, dissection, arteriovenous malformation, penetrating ulcer), unilateral	Surgery	Yes	1/1/2020	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34808	Endovascular placement of iliac artery occlusion device (List separately in addition to code for primary procedure)	Surgery	Yes	10/1/2001	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34812	Open femoral artery exposure for delivery of endovascular prosthesis, by groin incision, unilateral (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34813	Placement of femoral-femoral prosthetic graft during endovascular aortic aneurysm repair (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34820	Open iliac artery exposure for delivery of endovascular prosthesis or iliac occlusion during endovascular therapy, by abdominal or retroperitoneal incision, unilateral (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34830	Open repair of infrarenal aortic aneurysm or dissection, plus repair of associated arterial trauma, following unsuccessful endovascular repair; tube prosthesis	Surgery	Yes	1/1/2001	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34831	Open repair of infrarenal aortic aneurysm or dissection, plus repair of associated arterial trauma, following unsuccessful endovascular repair; aorto-bi-iliac prosthesis	Surgery	Yes	1/1/2001	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34832	Open repair of infrarenal aortic aneurysm or dissection, plus repair of associated arterial trauma, following unsuccessful endovascular repair; aorto-bifemoral prosthesis	Surgery	Yes	1/1/2001	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34833	Open iliac artery exposure with creation of conduit for delivery of endovascular prosthesis or for establishment of cardiopulmonary bypass, by abdominal or retroperitoneal incision, unilateral (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34834	Open brachial artery exposure for delivery of endovascular prosthesis, unilateral (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34839	Physician planning of a patient-specific fenestrated visceral aortic endograft requiring a minimum of 90 minutes of physician time	Surgery	Yes	1/1/2015	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34841	Endovascular repair of visceral aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) by deployment of a fenestrated visceral aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including one visceral artery endoprosthesis (superior mesenteric, celiac or renal artery)	Surgery	Yes	1/1/2018	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34842	Endovascular repair of visceral aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) by deployment of a fenestrated visceral aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including two visceral artery endoprostheses (superior mesenteric, celiac and/or renal artery[s])	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34843	Endovascular repair of visceral aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) by deployment of a fenestrated visceral aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including three visceral artery endoprostheses (superior mesenteric, celiac and/or renal artery[s])	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34844	Endovascular repair of visceral aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) by deployment of a fenestrated visceral aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including four or more visceral artery endoprostheses (superior mesenteric, celiac and/or renal artery[s])	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34845	Endovascular repair of visceral aorta and infrarenal abdominal aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) with a fenestrated visceral aortic endograft and concomitant unibody or modular infrarenal aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including one visceral artery endoprosthesis (superior mesenteric, celiac or renal artery)	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34846	Endovascular repair of visceral aorta and infrarenal abdominal aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) with a fenestrated visceral aortic endograft and concomitant unibody or modular infrarenal aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including two visceral artery endoprostheses (superior mesenteric, celiac and/or renal artery[s])	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34847	Endovascular repair of visceral aorta and infrarenal abdominal aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) with a fenestrated visceral aortic endograft and concomitant unibody or modular infrarenal aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including three visceral artery endoprostheses (superior mesenteric, celiac and/or renal artery[s])	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	34848	Endovascular repair of visceral aorta and infrarenal abdominal aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) with a fenestrated visceral aortic endograft and concomitant unibody or modular infrarenal aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including four or more visceral artery endoprostheses (superior mesenteric, celiac and/or renal artery[s])	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35001	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm and associated occlusive disease, carotid, subclavian artery, by neck incision	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35002	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, carotid, subclavian artery, by neck incision	Surgery	Yes	1/1/1998	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35005	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, vertebral artery	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35013	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, axillary-brachial artery, by arm incision	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35021	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, innominate, subclavian artery, by thoracic incision	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35022	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, innominate, subclavian artery, by thoracic incision	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35081	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, abdominal aorta	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35082	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, abdominal aorta	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35091	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, abdominal aorta involving visceral vessels (mesenteric, celiac, renal)	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35092	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, abdominal aorta involving visceral vessels (mesenteric, celiac, renal)	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35102	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, abdominal aorta involving iliac vessels (common, hypogastric, external)	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35103	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, abdominal aorta involving iliac vessels (common, hypogastric, external)	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35111	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, splenic artery	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35112	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, splenic artery	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35121	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, hepatic, celiac, renal, or mesenteric artery	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35122	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, hepatic, celiac, renal, or mesenteric artery	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35131	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, iliac artery (common, hypogastric, external)	Surgery	Yes	1/1/2018	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35132	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, iliac artery (common, hypogastric, external)	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35141	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, common femoral artery (profunda femoris, superficial femoral)	Surgery	Yes	1/1/1998	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35142	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, common femoral artery (profunda femoris, superficial femoral)	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35151	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, popliteal artery	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35152	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, popliteal artery	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35182	Repair, congenital arteriovenous fistula; thorax and abdomen	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35189	Repair, acquired or traumatic arteriovenous fistula; thorax and abdomen	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35211	Repair Blood Vessel, Direct; Intrathoracic, with Bypass	Surgery	Yes	7/1/2014	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35216	Repair Blood Vessel, Direct; Intrathoracic, without Bypass	Surgery	Yes	7/1/2014	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35221	Repair Blood Vessel, Direct; Intra-Abdominal	Surgery	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35241	Repair blood vessel with vein graft; intrathoracic, with bypass	Surgery	Yes	7/1/2014	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35246	Repair blood vessel with vein graft; intrathoracic, without bypass	Surgery	Yes	7/1/2014	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35251	Repair blood vessel with vein graft; intra-abdominal	Surgery	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35271	Repair blood vessel with graft other than vein; intrathoracic, with bypass	Surgery	Yes	7/1/2014	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35276	Repair blood vessel with graft other than vein; intrathoracic, without bypass	Surgery	Yes	7/1/2014	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35281	Repair blood vessel with graft other than vein; intra-abdominal	Surgery	Yes	1/1/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35301	Thromboendarterectomy, including patch graft, if performed; carotid, vertebral, subclavian, by neck incision	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35302	Thromboendarterectomy, including patch graft, if performed; superficial femoral artery	Surgery	Yes	1/1/2007	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35303	Thromboendarterectomy, including patch graft, if performed; popliteal artery	Surgery	Yes	1/1/2007	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35304	Thromboendarterectomy, including patch graft, if performed; tibioperoneal trunk artery	Surgery	Yes	1/1/2007	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35305	Thromboendarterectomy, including patch graft, if performed; tibial or peroneal artery, initial vessel	Surgery	Yes	1/1/2007	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35306	Thromboendarterectomy, including patch graft, if performed; each additional tibial or peroneal artery (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/2011	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35311	Thromboendarterectomy, including patch graft, if performed; subclavian, innominate, by thoracic incision	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35321	Thromboendarterectomy, including patch graft, if performed; axillary-brachial	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35331	Thromboendarterectomy, including Patch Graft, If Performed; Abdominal Aorta	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35341	Thromboendarterectomy, including patch graft, if performed; mesenteric, celiac, or renal	Surgery	Yes	4/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35351	Thromboendarterectomy, including Patch Graft, If Performed; Iliac	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35355	Thromboendarterectomy, including Patch Graft, If Performed; Iliofemoral	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35361	Thromboendarterectomy, including Patch Graft, If Performed; Combined Aortoiliac	Surgery	Yes	1/1/1997	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35363	Thromboendarterectomy, including Patch Graft, If Performed; Combined Aortoiliofemoral	Surgery	Yes	1/1/1997	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35371	Thromboendarterectomy, including Patch Graft, If Performed; Common Femoral	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35372	Thromboendarterectomy, including Patch Graft, If Performed; Deep (Profunda) Femoral	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35390	Reoperation, carotid, thromboendarterectomy, more than 1 month after original operation (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/1998	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35400	Angioscopy (noncoronary vessels or grafts) during therapeutic intervention (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35500	Harvest of upper extremity vein, 1 segment, for lower extremity or coronary artery bypass procedure (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/2007	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35501	Bypass Graft, with Vein; Common Carotid-Ipsilateral Internal Carotid	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35506	Bypass graft, with vein; carotid-subclavian or subclavian-carotid	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35508	Bypass graft, with vein; carotid-vertebral	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35509	Bypass Graft, with Vein; Carotid-Contralateral Carotid	Surgery	Yes	1/1/2006	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35510	Bypass Graft, with Vein; Carotid-Brachial	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35511	Bypass Graft, with Vein; Subclavian-Subclavian	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35512	Bypass Graft, with Vein; Subclavian-Brachial	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35515	Bypass Graft, with Vein; Subclavian-Vertebral	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35516	Bypass Graft, with Vein; Subclavian-Axillary	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35518	Bypass Graft, with Vein; Axillary-Axillary	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35521	Bypass Graft, with Vein; Axillary-Femoral	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35522	Bypass Graft, with Vein; Axillary-Brachial	Surgery	Yes	1/1/2004	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35523	Bypass graft, with vein; brachial-ulnar or -radial	Surgery	Yes	1/1/2008	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35525	Bypass Graft, with Vein; Brachial-Brachial	Surgery	Yes	1/1/2008	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35526	Bypass graft, with vein; aortosubclavian, aortoinnominate, or aortocarotid	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35531	Bypass Graft, with Vein; Aortoceliac or Aortomesenteric	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35533	Bypass graft, with vein; axillary-femoral-femoral	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35535	Bypass graft, with vein; hepatorenal	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35536	Bypass graft, with vein; splenorenal	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35537	Bypass graft, with vein; aortoiliac	Surgery	Yes	1/1/2007	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35538	Bypass graft, with vein; aortobi-iliac	Surgery	Yes	1/1/2007	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35539	Bypass graft, with vein; aortofemoral	Surgery	Yes	1/1/2007	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35540	Bypass graft, with vein; aortobifemoral	Surgery	Yes	1/1/2007	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35556	Bypass Graft, with Vein; Femoral-Popliteal	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35558	Bypass Graft, with Vein; Femoral-Femoral	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35560	Bypass Graft, with Vein; Aortorenal	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35563	Bypass graft, with vein; iliiliac	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35565	Bypass Graft, with Vein; Iliofemoral	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35566	Bypass graft, with vein; femoral-anterior tibial, posterior tibial, peroneal artery or other distal vessels	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35570	Bypass graft, with vein; tibial-tibial, peroneal-tibial, or tibial/peroneal trunk tibial	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35571	Bypass graft, with vein; popliteal-tibial, -peroneal artery or other distal vessels	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35572	Harvest of femoropopliteal vein, 1 segment, for vascular reconstruction procedure (eg, aortic, vena caval, coronary, peripheral artery) (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/2003	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35583	In-situ vein bypass; femoral-popliteal	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35585	In-situ vein bypass; femoral-anterior tibial, posterior tibial, or peroneal artery	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35587	In-situ vein bypass; popliteal-tibial, peroneal	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35600	Harvest of upper extremity artery, 1 segment, for coronary artery bypass procedure, open	Surgery	Yes	1/1/2001	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35601	Bypass Graft, with Other than Vein; Common Carotid-Ipsilateral Internal Carotid	Surgery	Yes	1/1/2006	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35606	Bypass Graft, with Other than Vein; Carotid-Subclavian	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35612	Bypass Graft, with Other than Vein; Subclavian-Subclavian	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35616	Bypass Graft, with Other than Vein; Subclavian-Axillary	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35621	Bypass Graft, with Other than Vein; Axillary-Femoral	Surgery	Yes	1/1/1998	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35623	Bypass graft, with other than vein; axillary-popliteal or -tibial	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35626	Bypass graft, with other than vein; aortosubclavian, aortoinnominate, or aortocarotid	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35631	Bypass Graft, with Other than Vein; Aortoceliac, Aortomesenteric, Aortorenal	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35632	Bypass graft, with other than vein; ilio-celiac	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35633	Bypass graft, with other than vein; ilio-mesenteric	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35634	Bypass Graft, with Other than Vein; Iliorenal	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35636	Bypass graft, with other than vein; splenorenal (splenic to renal arterial anastomosis)	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35637	Bypass Graft, with Other than Vein; Aortoiliac	Surgery	Yes	1/1/2007	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35638	Bypass Graft, with Other than Vein; Aortobi-iliac	Surgery	Yes	1/1/2007	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35642	Bypass Graft, with Other than Vein; Carotid-Vertebral	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35645	Bypass Graft, with Other than Vein; Subclavian-Vertebral	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35646	Bypass Graft, with Other than Vein; Aortobifemoral	Surgery	Yes	7/1/2003	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35647	Bypass Graft, with Other than Vein; Aortofemoral	Surgery	Yes	7/1/2003	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35650	Bypass Graft, with Other than Vein; Axillary-Axillary	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35654	Bypass Graft, with Other than Vein; Axillary-Femoral-Femoral	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35656	Bypass Graft, with Other than Vein; Femoral-Popliteal	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35661	Bypass graft, with other than vein; femoral-femoral	Surgery	Yes	4/1/1997	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35663	Bypass Graft, with Other than Vein; Iliiliac	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35665	Bypass Graft, with Other than Vein; Iliofemoral	Surgery	Yes	1/1/2009	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35666	Bypass graft, with other than vein; femoral-anterior tibial, posterior tibial, or peroneal artery	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35671	Bypass graft, with other than vein; popliteal-tibial or -peroneal artery	Surgery	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35681	Bypass graft; composite, prosthetic and vein (List separately in addition to code for primary procedure)	Surgery	Yes	9/5/2000	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35682	Bypass graft; autogenous composite, 2 segments of veins from 2 locations (List separately in addition to code for primary procedure)	Surgery	Yes	9/5/2000	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35683	Bypass graft; autogenous composite, 3 or more segments of vein from 2 or more locations (List separately in addition to code for primary procedure)	Surgery	Yes	9/5/2000	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35691	Transposition and/or Reimplantation; Vertebral To Carotid Artery	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35693	Transposition and/or Reimplantation; Vertebral To Subclavian Artery	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35694	Transposition and/or Reimplantation; Subclavian To Carotid Artery	Surgery	Yes	1/1/2006	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35695	Transposition and/or Reimplantation; Carotid To Subclavian Artery	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35697	Reimplantation, visceral artery to infrarenal aortic prosthesis, each artery (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/2004	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35700	Reoperation, femoral-popliteal or femoral (popliteal)-anterior tibial, posterior tibial, peroneal artery, or other distal vessels, more than 1 month after original operation (List separately in addition to code for primary procedure)	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35701	Exploration not followed by surgical repair, artery; neck (eg, carotid, subclavian)	Surgery	Yes	1/1/2006	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35702	Exploration not followed by surgical repair, artery; upper extremity (eg, axillary, brachial, radial, ulnar)	Surgery	Yes	1/1/2020	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35703	Exploration not followed by surgical repair, artery; lower extremity (eg, common femoral, deep femoral, superficial femoral, popliteal, tibial, peroneal)	Surgery	Yes	1/1/2020	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35800	Exploration for Postoperative Hemorrhage, Thrombosis or Infection; Neck	Surgery	Yes	1/1/1999	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35820	Exploration for Postoperative Hemorrhage, Thrombosis or Infection; Chest	Surgery	Yes	1/1/1999	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35840	Exploration for Postoperative Hemorrhage, Thrombosis or Infection; Abdomen	Surgery	Yes	1/1/2002	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35870	Repair of Graft-Enteric Fistula	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35901	Excision of Infected Graft; Neck	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35905	Excision of Infected Graft; Thorax	Surgery	Yes	1/1/1998	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	35907	Excision of Infected Graft; Abdomen	Surgery	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93978	Duplex scan of aorta, inferior vena cava, iliac vasculature, or bypass grafts; complete study	Abdominal Arterial	Yes	1/1/2012	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93979	Duplex scan of aorta, inferior vena cava, iliac vasculature, or bypass grafts; unilateral or limited study	Abdominal Arterial	Yes	1/1/2012	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	78414	Determination of central c-v hemodynamics (non-imaging) (eg, ejection fraction with probe technique) with or without pharmacologic intervention or exercise, single or multiple determinations	Nuclear Imaging	Yes	10/14/2019	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93610	Intra-atrial Pacing	Electrophysiology Studies (EPS)	Yes	4/1/2015	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93612	Intraventricular Pacing	Electrophysiology Studies (EPS)	Yes	4/1/2015	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93613	Intracardiac electrophysiologic 3-dimensional mapping (List separately in addition to code for primary procedure)	Electrophysiology Studies (EPS)	Yes	1/1/2002	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93619	Comprehensive electrophysiologic evaluation with right atrial pacing and recording, right ventricular pacing and recording, His bundle recording, including insertion and repositioning of multiple electrode catheters, without induction or attempted induction of arrhythmia	Electrophysiology Studies (EPS)	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93620	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of arrhythmia; with right atrial pacing and recording, right ventricular pacing and recording, His bundle recording	Electrophysiology Studies (EPS)	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93623	Programmed stimulation and pacing after intravenous drug infusion (List separately in addition to code for primary procedure)	Electrophysiology Studies (EPS)	Yes	1/1/1998	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93662	Intracardiac echocardiography during therapeutic/diagnostic intervention, including imaging supervision and interpretation (List separately in addition to code for primary procedure)	Electrophysiology Studies (EPS)	Yes	1/1/2001	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93650	Intracardiac catheter ablation of atrioventricular node function, atrioventricular conduction for creation of complete heart block, with or without temporary pacemaker placement	Ablation	Yes	1/1/1996	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93653	Comprehensive electrophysiologic evaluation with insertion and repositioning of multiple electrode catheters, induction or attempted induction of an arrhythmia with right atrial pacing and recording and catheter ablation of arrhythmogenic focus, including intracardiac electrophysiologic 3-dimensional mapping, right ventricular pacing and recording, left atrial pacing and recording from coronary sinus or left atrium, and His bundle recording, when performed; with treatment of supraventricular tachycardia by ablation of fast or slow atrioventricular pathway, accessory atrioventricular connection, cavo-tricuspid isthmus or other single atrial focus or source of atrial re-entry	Ablation	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93654	Comprehensive electrophysiologic evaluation with insertion and repositioning of multiple electrode catheters, induction or attempted induction of an arrhythmia with right atrial pacing and recording and catheter ablation of arrhythmogenic focus, including intracardiac electrophysiologic 3-dimensional mapping, right ventricular pacing and recording, left atrial pacing and recording from coronary sinus or left atrium, and His bundle recording, when performed; with treatment of ventricular tachycardia or focus of ventricular ectopy including left ventricular pacing and recording, when performed	Ablation	Yes	1/1/2013	7/1/2026
Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	93656	Comprehensive electrophysiologic evaluation with transseptal catheterizations, insertion and repositioning of multiple electrode catheters, induction or attempted induction of an arrhythmia including left or right atrial pacing/recording, and intracardiac catheter ablation of atrial fibrillation by pulmonary vein isolation, including intracardiac electrophysiologic 3-dimensional mapping, intracardiac echocardiography with imaging supervision and interpretation, right ventricular pacing/recording, and His bundle recording, when performed	Ablation	Yes	1/1/2013	7/1/2026

Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36836	Percutaneous arteriovenous fistula creation, upper extremity, single access of both the peripheral artery and peripheral vein, including fistula maturation procedures (eg, transluminal balloon angioplasty, coil embolization) when performed, including all vascular access, imaging guidance and radiologic supervision and interpretation	Hemodialysis Access Creation	Yes	1/1/2023	7/1/2026
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Molina HealthCare	Medicare	AZ, CT, IA, IL, KY, MS, NE, NV, NM, UT, WA	Cardiology	36837	Percutaneous arteriovenous fistula creation, upper extremity, separate access sites of the peripheral artery and peripheral vein, including fistula maturation procedures (eg, transluminal balloon angioplasty, coil embolization) when performed, including all vascular access, imaging guidance and radiologic supervision and interpretation	Hemodialysis Access Creation	Yes	1/1/2023	7/1/2026
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