

Horizon Blue Cross Blue Shield of New Jersey Molecular and Genomic Testing Program

Molecular and Genomic Testing Procedure Code Listing

Procedure Codes Subject to MND

The following CPT® and HCPCS codes are subject to Medical Necessity Determination as part of our Molecular and Genomic Testing Program.

PROCEDURE CODES				
0001U	0057U	81294	81413	81493
0004M	0060U	81295	81414	81504
0005U	81162	81297	81415	81519
0006M	81201	81298	81416	81520
0007M	81203	81300	81417	81521
0011M	81211	81313	81422	81525
0012M	81212	81317	81425	81535
0013M	81213	81319	81426	81536
0012U	81214	81321	81427	81538
0013U	81215	81323	81430	81539
0014U	81216	81325	81431	81540
0018U	81217	81327	81432	81541
0019U	81222	81328	81433	81545
0022U	81223	81335	81434	81551
0026U	81225	81346	81435	81595
0028U	81226	81355	81436	81599
0029U	81227	81361	81437	84999
0030U	81228	81363	81438	G9143
0031U	81229	81364	81439	S3800
0032U	81230	81400	81440	S3840
0033U	81231	81401	81442	S3841
0034U	81232	81402	81445	S3842
0036U	81238	81403	81448	S3845
0037U	81249	81404	81450	S3846
0045U	81257	81405	81455	S3852
0047U	81259	81406	81460	S3854
0048U	81269	81407	81465	S3861
0050U	81283	81408	81470	S3865
0053U	81287	81410	81471	S3866
0055U	81291	81411	81479	S3870
0056U	81292	81412	81490	

CPT code 81528 removed from this program effective August 23, 2018.

This document was revised on August 10, 2018, and may be subject to change.

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