

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

PROCEDURE CODES

0001U	0070U	0158U	0238U	81229	81319	81427	81536
0002M	0071U	0159U	0239U	81230	81321	81430	81538
0003M	0072U	0160U	0242U	81231	81322	81431	81539
0004M	0073U	0161U	0244U	81232	81323	81432	81540
0005U	0074U	0162U	0245U	81238	81325	81433	81541
0006M	0075U	0169U	0246U	81248	81326	81434	81542
0007M	0076U	0170U	0250U	81249	81327	81435	81546
0011M	0078U	0171U	0252U	81252	81328	81436	81551
0012M	0079U	0172U	0253U	81253	81335	81437	81552
0013M	0084U	0173U	0254U	81257	81336	81438	81554
0012U	0087U	0175U	81162	81258	81337	81439	81595
0013U	0088U	0179U	81163	81259	81346	81440	81596
0014U	0089U	0203U	81164	81269	81350	81442	81599
0016M	0090U	0204U	81165	81277	81351	81443	84999
0018U	0094U	0205U	81166	81283	81353	81445	G9143
0019U	0101U	0208U	81167	81286	81355	81448	S3800
0022U	0102U	0209U	81173	81289	81361	81450	S3840
0026U	0103U	0211U	81174	81291	81362	81455	S3841
0029U	0111U	0212U	81185	81292	81363	81460	S3842
0030U	0113U	0213U	81186	81293	81364	81465	S3844
0031U	0114U	0214U	81189	81294	81400	81470	S3845
0032U	0118U	0215U	81190	81295	81406	81471	S3846
0033U	0120U	0216U	81201	81296	81407	81479	S3850
0034U	0129U	0217U	81202	81297	81408	81490	S3852
0036U	0130U	0218U	81203	81298	81410	81493	S3854
0037U	0131U	0220U	81212	81299	81411	81500	S3861
0045U	0132U	0228U	81215	81300	81412	81503	S3865
0047U	0133U	0229U	81216	81302	81413	81504	S3866
0048U	0134U	0230U	81217	81303	81414	81518	S3870
0050U	0135U	0231U	81221	81304	81415	81519	
0053U	0136U	0232U	81222	81306	81416	81520	
0055U	0137U	0233U	81223	81307	81417	81521	
0056U	0138U	0234U	81225	81308	81419	81522	
0060U	0153U	0235U	81226	81313	81422	81525	
0067U	0156U	0236U	81227	81317	81425	81529	
0069U	0157U	0237U	81228	81318	81426	81535	

For services to be provided after July 1, 2021, eviCore will also perform MND of the services represented by procedure codes 0250U, 0252U, 0253U, 0254U.

This document last revised on April 20, 2021, and may be subject to change.

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