

CPT CODE/DESCRIPTION OF SERVICES REFERENCE SHEET

Provider Instructions: Please consider the services provided and select the most applicable description of service and/or CPT Code, as applicable for the medical professional providing the service. For professional fees, we will only accept **one** description of service and/or CPT code from items 1-20. Please Note: If a colposcopy/digital imaging is performed, we will only accept **one** description of service from items 21-24.

CPT CODE	DESCRIPTION OF SERVICE	FEE SCHEDULE CATEGORY	
1	99201	Office outpatient New - 10 min	Professional Fee
2	99202	Office outpatient New - 20 min	Professional Fee
3	99203	Office outpatient New - 30 min	Professional Fee
4	99204	Office outpatient New - 45 min	Professional Fee
5	99205	Office outpatient New - 60 min	Professional Fee
6	99211	Office outpatient Established 5 min	Professional Fee
7	99212	Office outpatient Established 10 min	Professional Fee
8	99213	Office outpatient Established 15 min	Professional Fee
9	99214	Office outpatient Established 25 min	Professional Fee
10	99215	Office outpatient Established 40 min	Professional Fee
11	99241	Office Consultation 15 min	Professional Fee
12	99242	Office Consultation 30 min	Professional Fee
13	99243	Office Consultation 40 min	Professional Fee
14	99244	Office Consultation 60 min	Professional Fee
15	99245	Office Consultation 80 min	Professional Fee
16	99281	Emergency Dept Self Limited/Minor	Professional Fee
17	99282	Emergency Dept -Low to Moderate Severity	Professional Fee
18	99283	Emergency Dept - Moderate Severity	Professional Fee
19	99284	Emergency Dept - High Severity & Urgent Eval	Professional Fee
20	99285	Emergency Dept -High Severity & Threat Funcj	Professional Fee
21	56820	Colposcopy Vulva	Colposcopy
22	57420	Colposcopy Entire Vag w/Cervix if Present	Colposcopy
23	57452	Colposcopy Cervix Upper/adjacent Vagina	Colposcopy
24	99170	Anogential Exam w/Colposcopic magnification in childhood	Colposcopy
25	46600	Anoscopy Diagnostic w/wo Collection Spec	Anoscopy
26	36400	Venipuncture age 3 - Phys Skill Fem/Jug Vein not routine	Venipuncture
27	36405	Venipuncture age 3 - Phys Skill/Scalp Vein	Venipuncture
28	36406	Venipuncture age 3 - Phys Skill/other Vein	Venipuncture
29	36410	Venipuncture age 3 - Phys Skill	Venipuncture

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CPT CODE	DESCRIPTION OF SERVICE	FEE SCHEDULE CATEGORY	
30	36415	Collection of Venous Blood by Veinpuncture	Venipuncture
31	84702	Gonda Chornc quantitative - Pregnancy Test	Laboratory Test for Pregnancy
32	84703	Gonda Chornc qualtitative - Pregnancy Test	Laboratory Test for Pregnancy
33	81025	Urine Pregnancy Test Visual- color cmparsion methods	Laboratory Test for Pregnancy
34	86701	Antb HIV 1	HIV Testing
35	86702	Antb HIV 2	HIV Testing
36	86703	Antb HIV 1 & 2 - 1 Assay	HIV Testing
37	86687	Antb HTL-I	HIV Testing
38	86688	Antb HTL-II	HIV Testing
39	86689	Antb HTL/HIV Antb Confirmatory Test	HIV Testing
40	80074	Acute Hepatitis Panel	Hepatitis Panel
41	86704	Hepatitis B Core Antb HBCAB total	Hepatitis Panel
42	86705	Hepatitis B Core Antb HBCAB IMG Antb	Hepatitis Panel
43	86706	Hepatitis B Surface Antb HBSAB test	Hepatitis Panel
44	86709	Hepatitis Antb HAAB IMG Antb	Hepatitis Panel
45	87340	IAAD EIA B Surf Antigen	Hepatitis Panel
46	86803	Hepatitis C Antibody	Hepatitis Panel
47	86592	Syphilis Test Non Treponemal Antibody Qual	RPR
48	86593	Syphilis Test Quantitative	RPR
49	86694	Antibody Herpes Simplex Non Specific Type Test	Herpes Simplex
50	86696	Antibody Herpes Simplex Type 2	Herpes Simplex
51	87040	Culture Bacterial Blood Aerobic Isolation	Gonorrhea culture
52	87070	Culture Bacterial Except Urine, Blood or Stool, Aerobic Isol	Gonorrhea culture
53	87081	Culture Presumptive, Pathogenic Organisms, Screen Only	Gonorrhea culture
54	87590	IADNA Nisseria Gonorrhoeae Direct Probe	Gonorrhea culture
55	87591	IADNA Nisseria Gonorrhoeae Amp Probe	Gonorrhea culture
56	87592	IADNA Nisseria Gonorrhoeae Quantification	Gonorrhea culture
57	87270	Chlamydia Trachomatis	Chlamydia culture
58	87491	Chlamydia Trachomatis Amplified Probe Techinque	Chlamydia culture
59	87320	IAAD EIA Chlamydia Trachomatis	Chlamydia culture
60	86631	Antibody Chlamydia	Chlamydia culture
61	86632	Antibody Chlamydia IMG	Chlamydia culture
62	87110	Culture Chlamydia Any Source	Chlamydia culture
63	81000	Urinalysis Dipstick/Tablet Reagent Non Auto Microscopy	Urinalysis

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64	81001	<i>Urinalysis Dipstick/Tablet Reagent Auto Microscopy</i>	<i>Urinalysis</i>
65	81002	<i>Urinalysis Dipstick/Tablet Reagent Non Auto w/o Microscopy</i>	<i>Urinalysis</i>
66	81003	<i>Urinalysis Dipstick/Tablet Reagent Auto w/o Microscopy</i>	<i>Urinalysis</i>
67	81005	<i>Urinalysis Qualitative/Semiquan Except Immunoassays</i>	<i>Urinalysis</i>
68	81007	<i>Urinalysis Bacteriuria Screen Except Culture or Dipstick</i>	<i>Urinalysis</i>
69	81015	<i>Urinalysis Microscopic Only</i>	<i>Urinalysis</i>
70	87086	<i>Culture Bacterial Quantitative Colony Count Urine</i>	<i>Urine culture</i>
71	87088	<i>Culture Bacterial Isolation & Presumptive ID Isolate Each Urine</i>	<i>Urine culture</i>
72	87660	<i>IADNA Trichomonas Vaginalis Direct Probe</i>	<i>Trichomonas vaginalis</i>
73	87205	<i>Smear Primary Source Gram or Giemsa Stain for Bacteria, Fungi Cell</i>	<i>Trichomonas vaginalis</i>
74	87210	<i>Smear Primary Source Wet Mount for Infectious Agents</i>	<i>Trichomonas vaginalis</i>