

BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| A0080 | A0090 | BCBST | Procedure redundant to a portion of the listed procedure in that it describes essentially a component of the listed procedure with an incompatible variation or only a minor variation. |
| A0426 | Q3017 | BCBST | Edited code not allowed if used to report advanced life support assessment included in the listed service. |
| A0427 | Q3017 | BCBST | Edited code not allowed if used to report advanced life support assessment included in the listed service. |
| A4221 | A4206 | CMS | The edited code is a component of the listed code |
| A4221 | A4207 | CMS | The edited code is a component of the listed code |
| A4221 | A4208 | CMS | The edited code is a component of the listed code |
| A4221 | A4209 | CMS | The edited code is a component of the listed code |
| A4221 | A4210 | CMS | The edited code is a component of the listed code |
| A4221 | A4211 | CMS | The edited code is a component of the listed code |
| A4221 | A4212 | CMS | The edited code is a component of the listed code |
| A4221 | A4213 | CMS | The edited code is a component of the listed code |
| A4221 | A4215 | CMS | The edited code is a component of the listed code |
| A4221 | A4216 | CMS | The edited code is a component of the listed code |
| A4221 | A4220 | CMS | The edited code is a component of the listed code |
| A4221 | A4245 | CMS | The edited code is a component of the listed code |
| A4221 | A4305 | CMS | The edited code is a component of the listed code |
| A4221 | A4306 | CMS | The edited code is a component of the listed code |
| A4221 | A4547 | CMS | The edited code is a component of the listed code |
| A4221 | J1642 | CMS | The edited code is a component of the listed code |
| A4222 | A4206 | CMS | The edited code is a component of the listed code |
| A4222 | A4207 | CMS | The edited code is a component of the listed code |
| A4222 | A4208 | CMS | The edited code is a component of the listed code |
| A4222 | A4209 | CMS | The edited code is a component of the listed code |
| A4222 | A4210 | CMS | The edited code is a component of the listed code |
| A4222 | A4211 | CMS | The edited code is a component of the listed code |
| A4222 | A4212 | CMS | The edited code is a component of the listed code |
| A4222 | A4213 | CMS | The edited code is a component of the listed code |
| A4222 | A4215 | CMS | The edited code is a component of the listed code |
| A4222 | A4216 | CMS | The edited code is a component of the listed code |
| A4222 | A4220 | CMS | The edited code is a component of the listed code |
| A4222 | A4245 | CMS | The edited code is a component of the listed code |
| A4222 | A4305 | CMS | The edited code is a component of the listed code |
| A4222 | A4306 | CMS | The edited code is a component of the listed code |
| A4222 | A4547 | CMS | The edited code is a component of the listed code |
| A4222 | J1642 | CMS | The edited code is a component of the listed code |
| A4223 | A4206 | CMS | The edited code is a component of the listed code |
| A4223 | A4207 | CMS | The edited code is a component of the listed code |

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| A4223 | A4208 | CMS | The edited code is a component of the listed code |
| A4223 | A4209 | CMS | The edited code is a component of the listed code |
| A4223 | A4210 | CMS | The edited code is a component of the listed code |
| A4223 | A4211 | CMS | The edited code is a component of the listed code |
| A4223 | A4212 | CMS | The edited code is a component of the listed code |
| A4223 | A4213 | CMS | The edited code is a component of the listed code |
| A4223 | A4215 | CMS | The edited code is a component of the listed code |
| A4223 | A4216 | CMS | The edited code is a component of the listed code |
| A4223 | A4220 | CMS | The edited code is a component of the listed code |
| A4223 | A4245 | CMS | The edited code is a component of the listed code |
| A4223 | A4305 | CMS | The edited code is a component of the listed code |
| A4223 | A4306 | CMS | The edited code is a component of the listed code |
| A4223 | A4547 | CMS | The edited code is a component of the listed code |
| A4223 | J1642 | CMS | The edited code is a component of the listed code |
| A4261 | A4261 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4281 | A4281 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4282 | A4282 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4283 | A4283 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4284 | A4284 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4286 | A4286 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4311 | A4310 | BCBST | Edited code not allowed if used to report insertion tray included in the listed supply. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing catheter replacement. |
| A4311 | A4311 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4311 | A4338 | BCBST | Edited code not allowed if used to report Foley catheter included in the listed supply. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing Foley catheter replacement. |
| A4312 | A4310 | BCBST | Edited code not allowed if used to report insertion tray included in the listed supply. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing catheter replacement. |
| A4312 | A4311 | BCBST | Edited code redundant to a portion of the listed code in that it describes essentially a component of the listed code with an incompatible variation or only a minor variation. |
| A4312 | A4312 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4312 | A4344 | BCBST | Edited code not allowed if used to report Foley catheter included in the listed supply. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing Foley catheter replacement. |

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| A4313 | A4310 | BCBST | Edited code not allowed if used to report insertion tray included in the listed supply. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing catheter replacement. |
| A4313 | A4311 | BCBST | Edited code redundant to a portion of the listed code in that it describes essentially a component of the listed code with an incompatible variation or only a minor variation. |
| A4313 | A4312 | BCBST | Edited code redundant to a portion of the listed code in that it describes essentially a component of the listed code with an incompatible variation or only a minor variation. |
| A4313 | A4313 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4313 | A4346 | BCBST | Edited code not allowed if used to report Foley catheter included in the listed supply. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing Foley catheter replacement. |
| A4314 | A4310 | BCBST | Edited code not allowed if used to report insertion tray included in the listed supply. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing catheter replacement. |
| A4314 | A4311 | BCBST | Edited code not allowed if used to report insertion tray with Foley catheter included in the listed supply. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing catheter replacement. |
| A4314 | A4312 | BCBST | Edited code not allowed if used to report insertion tray with Foley catheter included in the listed supply. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing catheter replacement. |
| A4314 | A4313 | BCBST | Edited code not allowed if used to report insertion tray with Foley catheter included in the listed supply. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing catheter replacement. |
| A4314 | A4314 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4314 | A4338 | BCBST | Edited code not allowed if used to report Foley catheter included in the listed supply. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing Foley catheter replacement. |
| A4314 | A4354 | BCBST | Edited code not allowed if used to report insertion tray with drainage bag included in the listed supply. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing catheter replacement. |
| A4315 | A4310 | BCBST | Edited code not allowed if used to report insertion tray included in the listed supply. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing catheter replacement. |
| A4315 | A4311 | BCBST | Edited code not allowed if used to report insertion tray with Foley catheter included in the listed supply. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing catheter replacement. |
| A4315 | A4312 | BCBST | Edited code not allowed if used to report insertion tray with Foley catheter included in the listed supply. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing catheter replacement. |
| A4315 | A4313 | BCBST | Edited code not allowed if used to report insertion tray with Foley catheter included in the listed supply. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing catheter replacement. |
| A4315 | A4314 | BCBST | Edited code redundant to a portion of the listed code in that it describes essentially a component of the listed code with an incompatible variation or only a minor variation. |
| A4315 | A4315 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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| A4315 | A4344 | BCBST | Edited code not allowed if used to report Foley catheter included in the listed supply. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing Foley catheter replacement. |
| A4315 | A4354 | BCBST | Edited code not allowed if used to report insertion tray with drainage bag included in the listed supply. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing catheter replacement. |
| A4316 | A4310 | BCBST | Edited code not allowed if used to report insertion tray included in the listed supply. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing catheter replacement. |
| A4316 | A4311 | BCBST | Edited code not allowed if used to report insertion tray with Foley catheter included in the listed supply. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing catheter replacement. |
| A4316 | A4312 | BCBST | Edited code not allowed if used to report insertion tray with Foley catheter included in the listed supply. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing catheter replacement. |
| A4316 | A4313 | BCBST | Edited code not allowed if used to report insertion tray with Foley catheter included in the listed supply. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing catheter replacement. |
| A4316 | A4314 | BCBST | Edited code redundant to a portion of the listed code in that it describes essentially a component of the listed code with an incompatible variation or only a minor variation. |
| A4316 | A4315 | BCBST | Edited code redundant to a portion of the listed code in that it describes essentially a component of the listed code with an incompatible variation or only a minor variation. |
| A4316 | A4316 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4316 | A4346 | BCBST | Edited code not allowed if used to report Foley catheter included in the listed supply. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing Foley catheter replacement. |
| A4316 | A4354 | BCBST | Edited code not allowed if used to report insertion tray with drainage bag included in the listed supply. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing catheter replacement. |
| A4320 | A4322 | BCBST | Edited code not allowed if used to report bulb or piston syringe included in the listed supply. |
| A4338 | A4338 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4340 | A4338 | BCBST | Edited code redundant to a portion of the listed code in that it describes essentially a component of the listed code with an incompatible variation or only a minor variation. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing catheter replacement. |
| A4340 | A4340 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4344 | A4338 | BCBST | Edited code redundant to a portion of the listed code in that it describes essentially a component of the listed code with an incompatible variation or only a minor variation. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing catheter replacement. |
| A4344 | A4340 | BCBST | Edited code redundant to a portion of the listed code in that it describes essentially a component of the listed code with an incompatible variation or only a minor variation. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing catheter replacement. |
| A4344 | A4344 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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| A4346 | A4338 | BCBST | Edited code redundant to a portion of the listed code in that it describes essentially a component of the listed code with an incompatible variation or only a minor variation. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing catheter replacement. |
| A4346 | A4340 | BCBST | Edited code redundant to a portion of the listed code in that it describes essentially a component of the listed code with an incompatible variation or only a minor variation. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing catheter replacement. |
| A4346 | A4344 | BCBST | Edited code redundant to a portion of the listed code in that it describes essentially a component of the listed code with an incompatible variation or only a minor variation. Reimbursement may be appropriate if patient's condition is of long term standing and requires ongoing catheter replacement. |
| A4346 | A4346 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4375 | A4361 | BCBST | Edited code not allowed if used to report ostomy faceplate included in the listed supply. |
| A4376 | A4361 | BCBST | Edited code not allowed if used to report ostomy faceplate included in the listed supply. |
| A4379 | A4361 | BCBST | Edited code not allowed if used to report ostomy faceplate included in the listed supply. |
| A4380 | A4361 | BCBST | Edited code not allowed if used to report ostomy faceplate included in the listed supply. |
| A4387 | A4362 | BCBST | Edited code not allowed if used to report skin barrier included in the listed supply. |
| A4388 | A4385 | BCBST | Edited code not allowed if used to report skin barrier included in the listed supply. |
| A4389 | A4362 | BCBST | Edited code not allowed if used to report skin barrier included in the listed supply. |
| A4390 | A4385 | BCBST | Edited code not allowed if used to report skin barrier included in the listed supply. |
| A4391 | A4385 | BCBST | Edited code not allowed if used to report skin barrier included in the listed supply. |
| A4392 | A4362 | BCBST | Edited code not allowed if used to report skin barrier included in the listed supply. |
| A4393 | A4385 | BCBST | Edited code not allowed if used to report skin barrier included in the listed supply. |
| A4458 | A4458 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4470 | A4470 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4480 | A4480 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4561 | A4561 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4562 | A4561 | BCBST | Edited code redundant to a portion of the listed code in that it describes essentially a component of the listed code with an incompatible variation or only a minor variation. |
| A4562 | A4562 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4606 | A4606 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4611 | A4611 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4612 | A4612 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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| A4613 | A4613 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4614 | A4614 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4614 | S1015 | BCBST | Edited code error - may be reimbursed if medically indicated. |
| A4614 | S1016 | BCBST | Edited code error - may be reimbursed if medically indicated. |
| A4660 | A4660 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4660 | A4663 | BCBST | Edited code not allowed if used to report additional blood pressure cuff included in the listed supply. |
| A4663 | A4663 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4670 | A4670 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4931 | A4931 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A4932 | A4932 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A7025 | A7025 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| A7026 | A7026 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| B4034 | B4035 | BCBST | Edited code is an alternate method of the listed code. |
| B4034 | B4036 | BCBST | Edited code is an alternate method of the listed code |
| B4034 | B4164 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4034 | B4168 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4034 | B4172 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4034 | B4176 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4034 | B4178 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4034 | B4180 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4034 | B4185 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4034 | B4189 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4034 | B4193 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4034 | B4197 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4034 | B4199 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4034 | B4216 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |

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| B4034 | B4220 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4034 | B4222 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4034 | B4224 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4034 | B5000 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4034 | B5100 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4034 | B5200 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4034 | B9000 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4034 | B9002 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4034 | B9004 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4034 | B9006 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4034 | B9999 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4035 | B4164 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4035 | B4168 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4035 | B4172 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4035 | B4176 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4035 | B4178 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4035 | B4180 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4035 | B4185 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4035 | B4189 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4035 | B4193 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4035 | B4197 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4035 | B4199 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4035 | B4216 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4035 | B4220 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4035 | B4222 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4035 | B4224 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |

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| B4035 | B5000 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4035 | B5100 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4035 | B5200 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4035 | B9004 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4035 | B9006 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4035 | B9999 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4036 | B4035 | BCBST | The edited enteral supply code is redundant to the listed code in that it describes a supply for enteral feeding that is an alternative method of providing enteral feeding. One method, but not both, are typically used. |
| B4036 | B4164 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4036 | B4168 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4036 | B4172 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4036 | B4176 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4036 | B4178 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4036 | B4180 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4036 | B4185 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4036 | B4189 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4036 | B4193 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4036 | B4197 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4036 | B4199 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4036 | B4216 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4036 | B4220 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4036 | B4222 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4036 | B4224 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4036 | B5000 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4036 | B5100 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| B4036 | B5200 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4036 | B9000 | BCBST | The edited enteral supply code is redundant to the listed code in that it describes a supply for enteral feeding that is an alternative method of providing enteral feeding. One method, but not both, are typically used. |
| B4036 | B9002 | BCBST | The edited enteral supply code is redundant to the listed code in that it describes a supply for enteral feeding that is an alternative method of providing enteral feeding. One method, but not both, are typically used. |
| B4036 | B9004 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4036 | B9006 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4036 | B9999 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4081 | B4082 | BCBST | The edited code is considered redundant to or an integral component of the listed code. |
| B4086 | B4081 | BCBST | The edited supply code would rarely be needed in conjunction with the listed code. The listed supply, or the edited supply, but not both, would typically be used in a given patient. |
| B4086 | B4082 | BCBST | The edited supply code would rarely be needed in conjunction with the listed code. The listed supply, or the edited supply, but not both, would typically be used in a given patient. |
| B4086 | B4083 | BCBST | The edited supply code would rarely be needed in conjunction with the listed code. The listed supply, or the edited supply, but not both, would typically be used in a given patient. |
| B4102 | B4164 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4102 | B4168 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4102 | B4172 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4102 | B4176 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4102 | B4178 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4102 | B4180 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4102 | B4184 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4102 | B4185 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4102 | B4186 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4102 | B4189 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4102 | B4193 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4102 | B4197 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4102 | B4199 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4102 | B4216 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4102 | B4220 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4102 | B4222 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4102 | B4224 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4102 | B5000 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4102 | B5100 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4102 | B5200 | BCBST | Edited code is part of an alternate method than the listed code. |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|--|
| B4102 | B9004 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4102 | B9006 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4102 | B9999 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4103 | B4164 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4103 | B4168 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4103 | B4172 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4103 | B4176 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4103 | B4178 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4103 | B4180 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4103 | B4184 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4103 | B4185 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4103 | B4186 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4103 | B4189 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4103 | B4193 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4103 | B4197 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4103 | B4199 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4103 | B4216 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4103 | B4220 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4103 | B4222 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4103 | B4224 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4103 | B5000 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4103 | B5100 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4103 | B5200 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4103 | B9004 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4103 | B9006 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4103 | B9999 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4104 | B4164 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4104 | B4168 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4104 | B4172 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4104 | B4176 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4104 | B4178 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4104 | B4180 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4104 | B4184 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4104 | B4185 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4104 | B4186 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4104 | B4189 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4104 | B4193 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4104 | B4197 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4104 | B4199 | BCBST | Edited code is part of an alternate method than the listed code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| B4104 | B4216 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4104 | B4220 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4104 | B4222 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4104 | B4224 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4104 | B5000 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4104 | B5100 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4104 | B5200 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4104 | B9004 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4104 | B9006 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4104 | B9999 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4149 | B4164 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4149 | B4168 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4149 | B4172 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4149 | B4176 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4149 | B4178 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4149 | B4180 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4149 | B4184 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4149 | B4185 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4149 | B4186 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4149 | B4189 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4149 | B4193 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4149 | B4197 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4149 | B4199 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4149 | B4216 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4149 | B4220 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4149 | B4222 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4149 | B4224 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4149 | B5000 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4149 | B5100 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4149 | B5200 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4149 | B9004 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4149 | B9006 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4149 | B9999 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4150 | B4164 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4150 | B4168 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4150 | B4172 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4150 | B4176 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| B4150 | B4178 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4150 | B4180 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4150 | B4185 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4150 | B4189 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4150 | B4193 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4150 | B4197 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4150 | B4199 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4150 | B4216 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4150 | B4220 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4150 | B4222 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4150 | B4224 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4150 | B5000 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4150 | B5100 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4150 | B5200 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4150 | B9004 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4150 | B9006 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4150 | B9999 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4152 | B4164 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4152 | B4168 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4152 | B4172 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4152 | B4176 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4152 | B4178 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4152 | B4180 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4152 | B4185 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4152 | B4189 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |

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Commercial and Medicaid Code Bundling Rules

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| B4152 | B4193 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4152 | B4197 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4152 | B4199 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4152 | B4216 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4152 | B4220 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4152 | B4222 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4152 | B4224 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4152 | B5000 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4152 | B5100 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4152 | B5200 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4152 | B9004 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4152 | B9006 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4152 | B9999 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4153 | B4164 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4153 | B4168 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4153 | B4172 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4153 | B4176 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4153 | B4178 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4153 | B4180 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4153 | B4185 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4153 | B4189 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4153 | B4193 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4153 | B4197 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4153 | B4199 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4153 | B4216 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |

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| B4153 | B4220 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4153 | B4222 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4153 | B4224 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4153 | B5000 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4153 | B5100 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4153 | B5200 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4153 | B9004 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4153 | B9006 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4153 | B9999 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4154 | B4164 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4154 | B4168 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4154 | B4172 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4154 | B4176 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4154 | B4178 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4154 | B4180 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4154 | B4185 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4154 | B4189 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4154 | B4193 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4154 | B4197 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4154 | B4199 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4154 | B4216 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4154 | B4220 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4154 | B4222 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4154 | B4224 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4154 | B5000 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |

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| B4154 | B5100 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4154 | B5200 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4154 | B9004 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4154 | B9006 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4154 | B9999 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4155 | B4164 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4155 | B4168 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4155 | B4172 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4155 | B4176 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4155 | B4178 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4155 | B4180 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4155 | B4185 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4155 | B4189 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4155 | B4193 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4155 | B4197 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4155 | B4199 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4155 | B4216 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4155 | B4220 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4155 | B4222 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4155 | B4224 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4155 | B5000 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4155 | B5100 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4155 | B5200 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4155 | B9004 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4155 | B9006 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |

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Print Date: 08/11/2008

BlueCross BlueShield of Tennessee-Coding Bundling Rules

Source: PNC-CARR

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| B4155 | B9999 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B4157 | B4164 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4157 | B4168 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4157 | B4172 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4157 | B4176 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4157 | B4178 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4157 | B4180 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4157 | B4184 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4157 | B4185 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4157 | B4186 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4157 | B4189 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4157 | B4193 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4157 | B4197 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4157 | B4199 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4157 | B4216 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4157 | B4220 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4157 | B4222 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4157 | B4224 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4157 | B5000 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4157 | B5100 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4157 | B5200 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4157 | B9004 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4157 | B9006 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4157 | B9999 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4158 | B4164 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4158 | B4168 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4158 | B4172 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4158 | B4176 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4158 | B4178 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4158 | B4180 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4158 | B4184 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4158 | B4185 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4158 | B4186 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4158 | B4189 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4158 | B4193 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4158 | B4197 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4158 | B4199 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4158 | B4216 | BCBST | Edited code is part of an alternate method than the listed code. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| B4158 | B4220 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4158 | B4222 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4158 | B4224 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4158 | B5000 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4158 | B5100 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4158 | B5200 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4158 | B9004 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4158 | B9006 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4158 | B9999 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4159 | B4164 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4159 | B4168 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4159 | B4172 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4159 | B4176 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4159 | B4178 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4159 | B4180 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4159 | B4184 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4159 | B4185 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4159 | B4186 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4159 | B4189 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4159 | B4193 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4159 | B4197 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4159 | B4199 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4159 | B4216 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4159 | B4220 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4159 | B4222 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4159 | B4224 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4159 | B5000 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4159 | B5100 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4159 | B5200 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4159 | B9004 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4159 | B9006 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4159 | B9999 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4160 | B4164 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4160 | B4168 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4160 | B4172 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4160 | B4176 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4160 | B4178 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4160 | B4180 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4160 | B4184 | BCBST | Edited code is part of an alternate method than the listed code. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| B4160 | B4185 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4160 | B4186 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4160 | B4189 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4160 | B4193 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4160 | B4197 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4160 | B4199 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4160 | B4216 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4160 | B4220 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4160 | B4222 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4160 | B4224 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4160 | B5000 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4160 | B5100 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4160 | B5200 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4160 | B9004 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4160 | B9006 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4160 | B9999 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4161 | B4164 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4161 | B4168 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4161 | B4172 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4161 | B4176 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4161 | B4178 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4161 | B4180 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4161 | B4184 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4161 | B4185 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4161 | B4186 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4161 | B4189 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4161 | B4193 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4161 | B4197 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4161 | B4199 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4161 | B4216 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4161 | B4220 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4161 | B4222 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4161 | B4224 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4161 | B5000 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4161 | B5100 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4161 | B5200 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4161 | B9004 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4161 | B9006 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4161 | B9999 | BCBST | Edited code is part of an alternate method than the listed code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| B4162 | B4164 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4162 | B4168 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4162 | B4172 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4162 | B4176 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4162 | B4178 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4162 | B4180 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4162 | B4184 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4162 | B4185 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4162 | B4186 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4162 | B4189 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4162 | B4193 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4162 | B4197 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4162 | B4199 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4162 | B4216 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4162 | B4220 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4162 | B4222 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4162 | B4224 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4162 | B5000 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4162 | B5100 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4162 | B5200 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4162 | B9004 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4162 | B9006 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4162 | B9999 | BCBST | Edited code is part of an alternate method than the listed code. |
| B4164 | B4180 | BCBST | Edited code is alternate solution of different strength. One strength, not both, typically used. |
| B4164 | B4189 | BCBST | The edited parenteral supply code is redundant to the listed code in that it describes a supply for parenteral feeding that is an alternate solution for parenteral feeding. One method, but not both, are typically used. |
| B4164 | B4193 | BCBST | Premix parenteral solutions not typically required with homemix solutions. |
| B4164 | B4197 | BCBST | Premix parenteral solutions not typically required with homemix solutions. |
| B4164 | B4199 | BCBST | Premix parenteral solutions not typically required with homemix solutions. |
| B4164 | B4220 | BCBST | Edited code is part of an alternate method for parenteral therapy. One method, not both, typical used. |
| B4164 | B5000 | BCBST | Edited code is an alternate solution for parenteral therapy. One method, not both, typically used. |
| B4164 | B5100 | BCBST | Edited code is an alternate solution for parenteral therapy. One method, not both, typically used. |
| B4164 | B5200 | BCBST | Edited code is an alternate solution for parenteral therapy. One method, not both, typically used. |
| B4168 | B4172 | BCBST | Edited code is alternate solution of different strength. One strength, not both, typically used. |
| B4168 | B4176 | BCBST | Edited code is alternate solution of different strength. One strength, not both, typically used. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| B4168 | B4178 | BCBST | Edited code is alternate solution of different strength. One strength, not both, typically used. |
| B4168 | B4189 | BCBST | The edited parenteral supply code is redundant to the listed code in that it describes a supply for parenteral feeding that is an alternate solution for parenteral feeding. One method, but not both, are typically used. |
| B4168 | B4193 | BCBST | Premix parenteral solutions not typically required with homemix solutions. |
| B4168 | B4197 | BCBST | Premix parenteral solutions not typically required with homemix solutions. |
| B4168 | B4199 | BCBST | Premix parenteral solutions not typically required with homemix solutions. |
| B4168 | B4220 | BCBST | Edited code is part of an alternate method for parenteral therapy. One method, not both, typical used. |
| B4168 | B5000 | BCBST | Edited code is an alternate solution for parenteral therapy. One method, not both, typically used. |
| B4168 | B5100 | BCBST | Edited code is an alternate solution for parenteral therapy. One method, not both, typically used. |
| B4168 | B5200 | BCBST | Edited code is an alternate solution for parenteral therapy. One method, not both, typically used. |
| B4172 | B4176 | BCBST | Edited code is alternate solution of different strength. One strength, not both, typically used. |
| B4172 | B4178 | BCBST | Edited code is alternate solution of different strength. One strength, not both, typically used. |
| B4172 | B4189 | BCBST | The edited parenteral supply code is redundant to the listed code in that it describes a supply for parenteral feeding that is an alternate solution for parenteral feeding. One method, but not both, are typically used. |
| B4172 | B4193 | BCBST | Premix parenteral solutions not typically required with homemix solutions. |
| B4172 | B4197 | BCBST | Premix parenteral solutions not typically required with homemix solutions. |
| B4172 | B4199 | BCBST | Premix parenteral solutions not typically required with homemix solutions. |
| B4172 | B4220 | BCBST | Edited code is part of an alternate method for parenteral therapy. One method, not both, typical used. |
| B4172 | B5000 | BCBST | Edited code is an alternate solution for parenteral therapy. One method, not both, typically used. |
| B4172 | B5100 | BCBST | Edited code is an alternate solution for parenteral therapy. One method, not both, typically used. |
| B4172 | B5200 | BCBST | Edited code is an alternate solution for parenteral therapy. One method, not both, typically used. |
| B4176 | B4178 | BCBST | Edited code is alternate solution of different strength. One strength, not both, typically used. |
| B4176 | B4189 | BCBST | The edited parenteral supply code is redundant to the listed code in that it describes a supply for parenteral feeding that is an alternate solution for parenteral feeding. One method, but not both, are typically used. |
| B4176 | B4193 | BCBST | Premix parenteral solutions not typically required with homemix solutions. |
| B4176 | B4197 | BCBST | Premix parenteral solutions not typically required with homemix solutions. |
| B4176 | B4199 | BCBST | Premix parenteral solutions not typically required with homemix solutions. |
| B4176 | B4220 | BCBST | Edited code is part of an alternate method for parenteral therapy. One method, not both, typical used. |
| B4176 | B5000 | BCBST | Edited code is an alternate solution for parenteral therapy. One method, not both, typically used. |
| B4176 | B5100 | BCBST | Edited code is an alternate solution for parenteral therapy. One method, not both, typically used. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| B4176 | B5200 | BCBST | Edited code is an alternate solution for parenteral therapy. One method, not both, typically used. |
| B4178 | B4189 | BCBST | The edited parenteral supply code is redundant to the listed code in that it describes a supply for parenteral feeding that is an alternate solution for parenteral feeding. One method, but not both, are typically used. |
| B4178 | B4193 | BCBST | Premix parenteral solutions not typically required with homemix solutions. |
| B4178 | B4197 | BCBST | Premix parenteral solutions not typically required with homemix solutions. |
| B4178 | B4199 | BCBST | Premix parenteral solutions not typically required with homemix solutions. |
| B4178 | B4220 | BCBST | Edited code is part of an alternate method for parenteral therapy. One method, not both, typical used. |
| B4178 | B5000 | BCBST | Edited code is an alternate solution for parenteral therapy. One method, not both, typically used. |
| B4178 | B5100 | BCBST | Edited code is an alternate solution for parenteral therapy. One method, not both, typically used. |
| B4178 | B5200 | BCBST | Edited code is an alternate solution for parenteral therapy. One method, not both, typically used. |
| B4180 | B4189 | BCBST | The edited parenteral supply code is redundant to the listed code in that it describes a supply for parenteral feeding that is an alternate solution for parenteral feeding. One method, but not both, are typically used. |
| B4180 | B4193 | BCBST | Premix parenteral solutions not typically required with homemix solutions. |
| B4180 | B4197 | BCBST | Premix parenteral solutions not typically required with homemix solutions. |
| B4180 | B4199 | BCBST | Premix parenteral solutions not typically required with homemix solutions. |
| B4180 | B4220 | BCBST | Edited code is part of an alternate method for parenteral therapy. One method, not both, typical used. |
| B4180 | B5000 | BCBST | Edited code is an alternate solution for parenteral therapy. One method, not both, typically used. |
| B4180 | B5100 | BCBST | Edited code is an alternate solution for parenteral therapy. One method, not both, typically used. |
| B4180 | B5200 | BCBST | Edited code is an alternate solution for parenteral therapy. One method, not both, typically used. |
| B4189 | B4216 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4189 | J0610 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4189 | J0620 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4189 | J0636 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4189 | J1270 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4189 | J1610 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4189 | J1644 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4189 | J1751 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4189 | J1752 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4189 | J1756 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4189 | J1815 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4189 | J1955 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4189 | J2916 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4189 | J3411 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| B4189 | J3415 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4189 | J3420 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4189 | J3430 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4189 | J3475 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4189 | J3480 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4193 | B4216 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4193 | J0610 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4193 | J0620 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4193 | J0636 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4193 | J1270 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4193 | J1610 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4193 | J1644 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4193 | J1751 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4193 | J1752 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4193 | J1756 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4193 | J1815 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4193 | J1955 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4193 | J2916 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4193 | J3411 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4193 | J3415 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4193 | J3420 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4193 | J3430 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4193 | J3475 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4193 | J3480 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4197 | B4216 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4197 | J0610 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4197 | J0620 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4197 | J0636 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4197 | J1270 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4197 | J1610 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4197 | J1644 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4197 | J1751 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4197 | J1752 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4197 | J1756 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4197 | J1815 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4197 | J1955 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4197 | J2916 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4197 | J3411 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4197 | J3415 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| B4197 | J3420 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4197 | J3430 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4197 | J3475 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4197 | J3480 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4199 | B4216 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4199 | J0610 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4199 | J0620 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4199 | J0636 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4199 | J1270 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4199 | J1610 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4199 | J1644 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4199 | J1751 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4199 | J1752 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4199 | J1756 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4199 | J1815 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4199 | J1955 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4199 | J2916 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4199 | J3411 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4199 | J3415 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4199 | J3420 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4199 | J3430 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4199 | J3475 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4199 | J3480 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B4220 | B4216 | BCBST | Edited code is part of an alternate method for parenteral therapy. One method, not both typically used. |
| B4222 | B4189 | BCBST | Edited code is part of an alternate method for parenteral therapy. One method, not both, typical used. |
| B4222 | B4193 | BCBST | Edited code is part of an alternate method for parenteral therapy. One method, not both, typical used. |
| B4222 | B4197 | BCBST | Edited code is part of an alternate method for parenteral therapy. One method, not both, typical used. |
| B4222 | B4199 | BCBST | Edited code is part of an alternate method for parenteral therapy. One method, not both, typical used. |
| B4222 | B4220 | BCBST | Edited code is part of an alternate method for parenteral therapy. One method, not both, typical used. |
| B5000 | B4216 | BCBST | Edited code is part of an alternate method for parenteral therapy. One method, not both, typically used. |
| B5000 | B4216 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5000 | J0610 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5000 | J0620 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5000 | J0636 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5000 | J1270 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| B5000 | J1610 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5000 | J1644 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5000 | J1751 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5000 | J1752 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5000 | J1756 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5000 | J1815 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5000 | J1955 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5000 | J2916 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5000 | J3411 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5000 | J3415 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5000 | J3420 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5000 | J3430 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5000 | J3475 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5000 | J3480 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5100 | B4216 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5100 | B4216 | BCBST | Edited code is part of an alternate method for parenteral therapy. One method, not both, typically used. |
| B5100 | J0610 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5100 | J0620 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5100 | J0636 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5100 | J1270 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5100 | J1610 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5100 | J1644 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5100 | J1751 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5100 | J1752 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5100 | J1756 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5100 | J1815 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5100 | J1955 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5100 | J2916 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5100 | J3411 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5100 | J3415 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5100 | J3420 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5100 | J3430 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5100 | J3475 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5100 | J3480 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5200 | B4216 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5200 | B4216 | BCBST | Edited code is part of an alternate method for parenteral therapy. One method, not both, typically used. |
| B5200 | J0610 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5200 | J0620 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| B5200 | J0636 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5200 | J1270 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5200 | J1610 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5200 | J1644 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5200 | J1751 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5200 | J1752 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5200 | J1756 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5200 | J1815 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5200 | J1955 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5200 | J2916 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5200 | J3411 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5200 | J3415 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5200 | J3420 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5200 | J3430 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5200 | J3475 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B5200 | J3480 | BCBST | Additives not typically required with premixed parenteral nutrition solutions. |
| B9000 | B4164 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9000 | B4168 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9000 | B4172 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9000 | B4176 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9000 | B4178 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9000 | B4180 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9000 | B4185 | BCBST | Edited code is part of an alternate method of therapy. One method, not both, typically used. |
| B9000 | B4189 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9000 | B4193 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9000 | B4197 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9000 | B4199 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9000 | B4216 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9000 | B4220 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9000 | B4222 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| B9000 | B4224 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9000 | B5000 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9000 | B5100 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9000 | B5200 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9000 | B9000 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| B9000 | B9004 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9000 | B9006 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9000 | B9999 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9002 | B4164 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9002 | B4168 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9002 | B4172 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9002 | B4176 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9002 | B4178 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9002 | B4180 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9002 | B4185 | BCBST | Edited code is part of an alternate method of therapy. One method, not both, typically used. |
| B9002 | B4189 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9002 | B4193 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9002 | B4197 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9002 | B4199 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9002 | B4216 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9002 | B4220 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9002 | B4222 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9002 | B4224 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9002 | B5000 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| B9002 | B5100 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9002 | B5200 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9002 | B9000 | BCBST | Edited code redundant to the listed code in that it describes the major component of the listed code. |
| B9002 | B9002 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| B9002 | B9004 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9002 | B9006 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9002 | B9999 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9004 | B9004 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| B9004 | B9006 | BCBST | Edited code is an alternate type of parenteral pump. Only one type usually used. |
| B9006 | B9006 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| B9998 | B4034 | BCBST | Edited code may be redundant to the listed code if the listed code is used as an alternative method of reporting the edited supply. |
| B9998 | B4164 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9998 | B4168 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9998 | B4172 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9998 | B4176 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9998 | B4178 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9998 | B4180 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9998 | B4185 | BCBST | Edited code is part of an alternate method of therapy. One method, not both, typically used. |
| B9998 | B4189 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9998 | B4193 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9998 | B4197 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9998 | B4199 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9998 | B4216 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9998 | B4220 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9998 | B4222 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |

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|---------------------------|-----------------------|---------------|--|
| B9998 | B4224 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9998 | B5000 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9998 | B5100 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9998 | B5200 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9998 | B9004 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9998 | B9006 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| B9998 | B9999 | BCBST | Enteral nutrition typically not provided along with parenteral nutrition. In exceptional clinical instances, both may be medically indicated. |
| C1721 | C1721 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C1721 | C1722 | BCBST | The listed and edited codes are mutually exclusive supplies or devices. One or the other, but not both, would be used in a patient. |
| C1721 | C1882 | BCBST | The listed and edited codes are mutually exclusive supplies or devices. One or the other, but not both, would be used in a patient. |
| C1722 | C1722 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C1722 | C1882 | BCBST | The listed and edited codes are mutually exclusive supplies or devices. One or the other, but not both, would be used in a patient. |
| C1730 | C1730 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C1730 | C1732 | BCBST | The listed and edited codes are mutually exclusive supplies or devices. One or the other, but not both, would be used in a patient. |
| C1730 | C1733 | BCBST | The listed and edited codes are mutually exclusive supplies or devices. One or the other, but not both, would be used in a patient. |
| C1731 | C1730 | BCBST | The listed and edited codes are mutually exclusive supplies or devices. One or the other, but not both, would be used in a patient. |
| C1731 | C1731 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C1731 | C1732 | BCBST | The listed and edited codes are mutually exclusive supplies or devices. One or the other, but not both, would be used in a patient. |
| C1731 | C1733 | BCBST | The listed and edited codes are mutually exclusive supplies or devices. One or the other, but not both, would be used in a patient. |
| C1732 | C1732 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C1733 | C1732 | BCBST | The listed and edited codes are mutually exclusive supplies or devices. One or the other, but not both, would be used in a patient. |
| C1733 | C1733 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C1750 | C1750 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C1759 | C1759 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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|---------------------------|-----------------------|---------------|--|
| C1764 | C1764 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C1767 | C1767 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C1772 | C1772 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C1785 | C1785 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C1785 | C1786 | BCBST | The listed and edited pacemaker codes are mutually exclusive. One or the other, but not both, would be used in a patient. |
| C1785 | C2619 | BCBST | The listed and edited pacemaker codes are mutually exclusive. One or the other, but not both, would be used in a patient. |
| C1785 | C2620 | BCBST | The listed and edited pacemaker codes are mutually exclusive. One or the other, but not both, would be used in a patient. |
| C1785 | C2621 | BCBST | The listed and edited pacemaker codes are mutually exclusive. One or the other, but not both, would be used in a patient. |
| C1786 | C1786 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C1786 | C2619 | BCBST | The listed and edited pacemaker codes are mutually exclusive. One or the other, but not both, would be used in a patient. |
| C1786 | C2620 | BCBST | The listed and edited pacemaker codes are mutually exclusive. One or the other, but not both, would be used in a patient. |
| C1786 | C2621 | BCBST | The listed and edited pacemaker codes are mutually exclusive. One or the other, but not both, would be used in a patient. |
| C1813 | C1813 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C1813 | C2622 | BCBST | The listed and edited prosthesis codes are mutually exclusive. One or the other, but not both, would be used in a patient. |
| C1874 | C1874 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C1874 | C1875 | BCBST | The listed and edited stent codes are mutually exclusive. In most clinical instances, one or the other, but not both, would be used in a patient. |
| C1874 | C1876 | BCBST | The listed and edited stent codes are mutually exclusive. In most clinical instances, one or the other, but not both, would be used in a patient. |
| C1874 | C1877 | BCBST | The listed and edited stent codes are mutually exclusive. In most clinical instances, one or the other, but not both, would be used in a patient. |
| C1875 | C1875 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C1875 | C1877 | BCBST | The listed and edited stent codes are mutually exclusive. In most clinical instances, one or the other, but not both, would be used in a patient. |
| C1876 | C1875 | BCBST | The listed and edited stent codes are mutually exclusive. In most clinical instances, one or the other, but not both, would be used in a patient. |
| C1876 | C1876 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C1876 | C1877 | BCBST | The listed and edited stent codes are mutually exclusive. In most clinical instances, one or the other, but not both, would be used in a patient. |
| C1877 | C1877 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| C1882 | C1882 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C1891 | C1891 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C1895 | C1895 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C1895 | C1896 | BCBST | The listed and edited lead codes are mutually exclusive. One or the other, but not both, would be used in a patient. |
| C2619 | C2619 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C2619 | C2620 | BCBST | The listed and edited pacemaker codes are mutually exclusive. One or the other, but not both, would be used in a patient. |
| C2619 | C2621 | BCBST | The listed and edited pacemaker codes are mutually exclusive. One or the other, but not both, would be used in a patient. |
| C2620 | C2620 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C2620 | C2621 | BCBST | The listed and edited pacemaker codes are mutually exclusive. One or the other, but not both, would be used in a patient. |
| C2621 | C2621 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C2622 | C2622 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C2626 | C2626 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C8900 | C8900 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C8901 | C8901 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C8902 | C8900 | BCBST | The edited code is a component of the listed code when performed during the same session. Code C8900 and code C8901 rebundle to code C8902. |
| C8902 | C8901 | BCBST | The edited code is a component of the listed code when performed during the same session. |
| C8902 | C8902 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C8903 | C8903 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C8904 | C8904 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C8905 | C8903 | BCBST | The edited code is a component of the listed code when performed during the same session. Code C8903 and code C8904 rebundle to code C8905. |
| C8905 | C8904 | BCBST | The edited code is a component of the listed code when performed during the same session. |
| C8905 | C8905 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C8906 | C8903 | BCBST | The edited code is considered an integral component of the listed code. |
| C8906 | C8904 | BCBST | The edited code is considered an integral component of the listed code. |
| C8906 | C8905 | BCBST | The edited code is considered an integral component of the listed code. |
| C8906 | C8906 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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|---------------------------|-----------------------|---------------|--|
| C8907 | C8903 | BCBST | The listed and edited codes are mutually exclusive. |
| C8907 | C8904 | BCBST | The edited code is considered an integral component of the listed code. |
| C8907 | C8905 | BCBST | The listed and edited codes are mutually exclusive. |
| C8907 | C8907 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C8908 | C8903 | BCBST | The edited code is considered an integral component of the listed code. |
| C8908 | C8904 | BCBST | The edited code is considered an integral component of the listed code. |
| C8908 | C8905 | BCBST | The edited code is considered an integral component of the listed code. |
| C8908 | C8906 | BCBST | The edited code is a component of the listed code when performed during the same session. Code C8906 and code C8907 rebundle to code C8908. |
| C8908 | C8907 | BCBST | The edited code is a component of the listed code when performed during the same session. |
| C8908 | C8908 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C8909 | C8909 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C8910 | C8910 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C8911 | C8909 | BCBST | The edited code is a component of the listed code when performed during the same session. Code C8909 and code C8910 rebundle to code C8911. |
| C8911 | C8910 | BCBST | The edited code is a component of the listed code when performed during the same session. |
| C8911 | C8911 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C8912 | C8912 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C8913 | C8913 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| C8914 | C8912 | BCBST | The edited code is a component of the listed code when performed during the same session. Code C8912 and code C8913 rebundle to code C8914. |
| C8914 | C8913 | BCBST | The edited code is a component of the listed code when performed during the same session. |
| C8914 | C8914 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| D0120 | D0170 | BCBST | The edited code is incompatible with the listed code when performed at the same session as the listed procedure. |
| D0140 | D0170 | BCBST | The edited code is incompatible with the listed code when performed at the same session as the listed procedure. |
| D0150 | D0170 | BCBST | The edited code is incompatible with the listed code when performed at the same session as the listed procedure. |
| D0160 | D0170 | BCBST | The edited code is incompatible with the listed code when performed at the same session as the listed procedure. |
| D0180 | D0120 | BCBST | This code is redundant to the listed code in that it describes services or procedures essentially covered under the listed service or procedure. |
| D0180 | D0140 | BCBST | This code is redundant to the listed code in that it describes services or procedures essentially covered under the listed service or procedure. |
| D0180 | D0150 | BCBST | This code is redundant to the listed code in that it describes services or procedures essentially covered under the listed service or procedure. |

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| D0180 | D0160 | BCBST | This code is redundant to the listed code in that it describes services or procedures essentially covered under the listed service or procedure. |
| D0180 | D0170 | BCBST | This code is redundant to the listed code in that it describes services or procedures essentially covered under the listed service or procedure. |
| D0180 | D1310 | BCBST | The discussion with the patient of care management is considered a part of the listed procedure. |
| D0180 | D1320 | BCBST | The discussion with the patient of care management is considered a part of the listed procedure. |
| D0180 | D1330 | BCBST | The discussion with the patient of care management is considered a part of the listed procedure. |
| D0180 | D9110 | BCBST | This code is redundant to the listed code in that it describes services or procedures essentially covered under the listed service or procedure. |
| D5916 | V2623 | BCBST | The edited code is considered redundant to or an integral component of the listed code. |
| D5916 | V2629 | BCBST | The edited code is considered redundant to or an integral component of the listed code. |
| D9212 | 64400 | BCBST | Edited code not allowed if used to report anesthesia services included in the listed service. |
| D9220 | 00100 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00102 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00103 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00104 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00120 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00124 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00126 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00140 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00142 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00144 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00145 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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|---------------------------|-----------------------|---------------|--|
| D9220 | 00147 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00148 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00160 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00162 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00164 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00170 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00172 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00174 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00176 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00190 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00192 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00210 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00212 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00214 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00215 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00216 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00218 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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| D9220 | 00220 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00222 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00300 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00320 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00322 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00350 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00352 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00400 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00402 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00404 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00406 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00410 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00450 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00452 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00454 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00470 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00472 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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|---------------------------|-----------------------|---------------|--|
| D9220 | 00474 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00500 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00520 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00522 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00524 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00528 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00530 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00532 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00534 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00537 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00540 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00542 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00546 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00548 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00550 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00560 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00562 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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| D9220 | 00563 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00566 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00580 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00600 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00604 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00620 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00622 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00630 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00632 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00634 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00635 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00670 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00700 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00702 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00730 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00740 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00750 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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| D9220 | 00752 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00754 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00756 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00770 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00790 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00792 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00794 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00796 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00797 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00800 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00802 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00810 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00820 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00830 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00832 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00840 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00842 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| D9220 | 00844 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00846 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00848 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00851 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00860 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00862 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00864 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00865 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00866 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00868 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00870 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00872 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00873 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00880 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00882 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00902 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00904 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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|---------------------------|-----------------------|---------------|--|
| D9220 | 00906 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00908 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00910 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00912 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00914 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00916 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00918 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00920 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00922 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00924 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00926 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00928 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00930 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00932 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00934 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00936 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00938 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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|---------------------------|-----------------------|---------------|--|
| D9220 | 00940 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00942 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00944 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00948 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00950 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 00952 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01112 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01120 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01130 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01140 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01150 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01160 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01170 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01180 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01190 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01200 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01202 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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|---------------------------|-----------------------|---------------|--|
| D9220 | 01210 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01212 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01214 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01215 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01220 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01230 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01232 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01234 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01250 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01260 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01270 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01272 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01274 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01320 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01340 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01360 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01380 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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|---------------------------|-----------------------|---------------|--|
| D9220 | 01382 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01390 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01392 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01400 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01402 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01404 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01420 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01430 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01432 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01440 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01442 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01444 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01462 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01464 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01470 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01472 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01474 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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| D9220 | 01480 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01482 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01484 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01486 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01490 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01500 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01502 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01520 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01522 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01610 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01620 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01622 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01630 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01632 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01634 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01636 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01638 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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| D9220 | 01650 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01652 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01654 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01656 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01670 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01680 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01682 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01710 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01712 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01714 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01716 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01730 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01732 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01740 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01742 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01744 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01756 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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| D9220 | 01758 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01760 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01770 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01772 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01780 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01782 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01810 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01820 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01830 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01832 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01840 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01842 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01844 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01850 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01852 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01860 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01916 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| D9220 | 01920 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01922 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01924 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01925 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01926 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01930 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01931 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01932 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01933 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01951 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01952 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01953 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01960 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01961 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01962 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01963 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01967 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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|---------------------------|-----------------------|---------------|--|
| D9220 | 01968 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01969 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01990 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01996 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9220 | 01999 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00100 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00102 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00103 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00104 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00120 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00124 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00126 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00140 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00142 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00144 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00145 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00147 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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|---------------------------|-----------------------|---------------|--|
| D9221 | 00148 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00160 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00162 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00164 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00170 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00172 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00174 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00176 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00190 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00192 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00210 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00212 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00214 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00215 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00216 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00218 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00220 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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|---------------------------|-----------------------|---------------|--|
| D9221 | 00222 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00300 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00320 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00322 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00350 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00352 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00400 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00402 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00404 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00406 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00410 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00450 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00452 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00454 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00470 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00472 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00474 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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|---------------------------|-----------------------|---------------|--|
| D9221 | 00500 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00520 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00522 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00524 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00528 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00530 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00532 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00534 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00537 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00540 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00542 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00546 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00548 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00550 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00560 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00562 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00563 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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| D9221 | 00566 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00580 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00600 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00604 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00620 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00622 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00630 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00632 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00634 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00635 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00670 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00700 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00702 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00730 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00740 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00750 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00752 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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| D9221 | 00754 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00756 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00770 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00790 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00792 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00794 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00796 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00797 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00800 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00802 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00810 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00820 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00830 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00832 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00840 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00842 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00844 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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| D9221 | 00846 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00848 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00851 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00860 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00862 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00864 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00865 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00866 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00868 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00870 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00872 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00873 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00880 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00882 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00902 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00904 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00906 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| D9221 | 00908 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00910 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00912 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00914 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00916 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00918 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00920 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00922 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00924 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00926 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00928 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00930 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00932 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00934 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00936 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00938 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00940 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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|---------------------------|-----------------------|---------------|--|
| D9221 | 00942 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00944 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00948 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00950 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 00952 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01112 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01120 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01130 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01140 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01150 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01160 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01170 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01180 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01190 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01200 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01202 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01210 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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|---------------------------|-----------------------|---------------|--|
| D9221 | 01212 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01214 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01215 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01220 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01230 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01232 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01234 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01250 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01260 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01270 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01272 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01274 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01320 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01340 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01360 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01380 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01382 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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|---------------------------|-----------------------|---------------|--|
| D9221 | 01390 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01392 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01400 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01402 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01404 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01420 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01430 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01432 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01440 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01442 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01444 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01462 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01464 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01470 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01472 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01474 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01480 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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| D9221 | 01482 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01484 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01486 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01490 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01500 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01502 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01520 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01522 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01610 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01620 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01622 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01630 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01632 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01634 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01636 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01638 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01650 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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| D9221 | 01652 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01654 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01656 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01670 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01680 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01682 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01710 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01712 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01714 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01716 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01730 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01732 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01740 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01742 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01744 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01756 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01758 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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| D9221 | 01760 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01770 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01772 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01780 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01782 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01810 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01820 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01830 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01832 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01840 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01842 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01844 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01850 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01852 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01860 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01916 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01920 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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| D9221 | 01922 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01924 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01925 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01926 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01930 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01931 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01932 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01933 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01951 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01952 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01953 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01960 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01961 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01962 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01963 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01967 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01968 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| D9221 | 01969 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01990 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01996 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| D9221 | 01999 | BCBST | This CPT code represents essentially the same or very similar anesthesia services as the listed HCPCS code. In general, one or the other, but not both, may be reported. |
| E0110 | E0110 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0110 | E0111 | BCBST | The edited crutch code is considered a redundant item to the listed code. |
| E0110 | E0112 | BCBST | The edited crutch code is considered a redundant item to the listed code. |
| E0110 | E0113 | BCBST | The edited crutch code is considered a redundant item to the listed code. |
| E0110 | E0114 | BCBST | The edited crutch code is considered a redundant item to the listed code. |
| E0110 | E0116 | BCBST | The edited crutch code is considered a redundant item to the listed code. |
| E0110 | E0117 | BCBST | The edited crutch code is considered an incompatible item to the listed code. |
| E0111 | E0113 | BCBST | The edited crutch code is considered a redundant item to the listed code. |
| E0111 | E0116 | BCBST | The edited crutch code is considered a redundant item to the listed code. |
| E0111 | E0117 | BCBST | The edited crutch code is considered a redundant item to the listed code. |
| E0112 | E0111 | BCBST | The edited crutch code is considered a redundant item to the listed code. |
| E0112 | E0112 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0112 | E0113 | BCBST | The edited crutch code is considered a redundant item to the listed code. |
| E0112 | E0114 | BCBST | The edited crutch code is considered a redundant item to the listed code. |
| E0112 | E0116 | BCBST | The edited crutch code is considered a redundant item to the listed code. |
| E0112 | E0117 | BCBST | The edited crutch code is considered an incompatible item to the listed code. |
| E0113 | E0116 | BCBST | The edited crutch code is considered a redundant item to the listed code. |
| E0113 | E0117 | BCBST | The edited crutch code is considered a redundant item to the listed code. |
| E0114 | E0111 | BCBST | The edited crutch code is considered a redundant item to the listed code. |
| E0114 | E0113 | BCBST | The edited crutch code is considered a redundant item to the listed code. |
| E0114 | E0114 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0114 | E0116 | BCBST | The edited crutch code is considered a redundant item to the listed code. |
| E0114 | E0117 | BCBST | The edited crutch code is considered an incompatible item to the listed code. |
| E0116 | E0117 | BCBST | The edited crutch code is considered a redundant item to the listed code. |
| E0130 | E0130 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0130 | E0135 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0130 | E0141 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0130 | E0143 | BCBST | The edited walker code is considered redundant to the listed walker code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E0130 | E0144 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0130 | E0147 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0130 | E0148 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0130 | E0149 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0135 | E0135 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0135 | E0141 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0135 | E0143 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0135 | E0144 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0135 | E0147 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0135 | E0148 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0135 | E0149 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0141 | E0141 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0141 | E0143 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0141 | E0144 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0141 | E0147 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0141 | E0148 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0141 | E0149 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0143 | E0143 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0143 | E0144 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0143 | E0147 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0143 | E0148 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0143 | E0149 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0144 | E0144 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0144 | E0147 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0144 | E0148 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0144 | E0149 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0147 | E0147 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0147 | E0148 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0147 | E0149 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0148 | E0148 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0148 | E0149 | BCBST | The edited walker code is considered redundant to the listed walker code. |
| E0149 | E0149 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0160 | E0160 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0161 | E0160 | BCBST | The edited code is considered redundant to or an integral component of the listed code. |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|--|
| E0161 | E0161 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0163 | E0163 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0163 | E0165 | BCBST | The edited commode chair code is considered redundant to or an integral component of the listed code. |
| E0163 | E0168 | BCBST | The edited commode chair code is considered redundant to or an integral component of the listed code. |
| E0168 | E0168 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0168 | E0169 | BCBST | The edited commode chair code is considered redundant to or an integral component of the listed code. |
| E0181 | E0181 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0182 | E0182 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0184 | E0184 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0185 | E0185 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0186 | E0186 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0187 | E0187 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0188 | E0188 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0189 | E0189 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0193 | E0193 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0194 | E0194 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0196 | E0196 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0197 | E0197 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0198 | E0197 | BCBST | The edited air pad code is considered redundant to the listed code. |
| E0198 | E0198 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0199 | E0199 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0200 | E0200 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0202 | E0202 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0203 | E0203 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0205 | E0200 | BCBST | The edited heat lamp code is considered a redundant item to the listed code. |

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|---------------------------|-----------------------|---------------|--|
| E0205 | E0205 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0210 | E0210 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0215 | E0210 | BCBST | The edited heat pad code is considered redundant to the listed code. |
| E0215 | E0215 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0217 | E0217 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0218 | E0218 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0220 | E0220 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0221 | E0221 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0225 | E0225 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0225 | E0239 | BCBST | The edited code is considered redundant to or an integral component of the listed code. |
| E0230 | E0230 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0231 | E0231 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0232 | E0232 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0235 | E0235 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0236 | E0236 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0238 | E0238 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0239 | E0239 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0250 | E0250 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0250 | E0251 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0250 | E0255 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0250 | E0256 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0250 | E0260 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0250 | E0261 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0250 | E0265 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0250 | E0266 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|--|
| E0250 | E0270 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0250 | E0271 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0250 | E0272 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0250 | E0290 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0250 | E0291 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0250 | E0292 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0250 | E0293 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0250 | E0294 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0250 | E0295 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0250 | E0296 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0250 | E0297 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0250 | E0305 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0250 | E0310 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0251 | E0251 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0251 | E0255 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0251 | E0256 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0251 | E0260 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0251 | E0261 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0251 | E0265 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0251 | E0266 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0251 | E0270 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0251 | E0290 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0251 | E0291 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0251 | E0292 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0251 | E0293 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0251 | E0294 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E0251 | E0295 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0251 | E0296 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0251 | E0297 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0251 | E0305 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0251 | E0310 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0255 | E0255 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0255 | E0256 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0255 | E0260 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0255 | E0261 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0255 | E0265 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0255 | E0266 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0255 | E0270 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0255 | E0271 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0255 | E0272 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0255 | E0290 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0255 | E0291 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0255 | E0292 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0255 | E0293 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0255 | E0294 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0255 | E0295 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0255 | E0296 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0255 | E0297 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0255 | E0305 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0255 | E0310 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0256 | E0256 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0256 | E0260 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0256 | E0261 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|--|
| E0256 | E0265 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0256 | E0266 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0256 | E0270 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0256 | E0290 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0256 | E0291 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0256 | E0292 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0256 | E0293 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0256 | E0294 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0256 | E0295 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0256 | E0296 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0256 | E0297 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0256 | E0305 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0256 | E0310 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0260 | E0260 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0260 | E0261 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0260 | E0265 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0260 | E0266 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0260 | E0270 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0260 | E0271 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0260 | E0272 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0260 | E0290 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0260 | E0291 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0260 | E0292 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0260 | E0293 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0260 | E0294 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0260 | E0295 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |

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|---------------------------|-----------------------|---------------|--|
| E0260 | E0296 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0260 | E0297 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0260 | E0305 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0260 | E0310 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0261 | E0261 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0261 | E0265 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0261 | E0266 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0261 | E0270 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0261 | E0290 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0261 | E0291 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0261 | E0292 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0261 | E0293 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0261 | E0294 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0261 | E0295 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0261 | E0296 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0261 | E0297 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0261 | E0305 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0261 | E0310 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0265 | E0265 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0265 | E0266 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0265 | E0270 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0265 | E0271 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0265 | E0272 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0265 | E0290 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0265 | E0291 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0265 | E0292 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0265 | E0293 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E0265 | E0294 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0265 | E0295 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0265 | E0296 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0265 | E0297 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0265 | E0305 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0265 | E0310 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0266 | E0266 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0266 | E0270 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0266 | E0290 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0266 | E0291 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0266 | E0292 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0266 | E0293 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0266 | E0294 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0266 | E0295 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0266 | E0296 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0266 | E0297 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0266 | E0305 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0266 | E0310 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0270 | E0270 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0270 | E0271 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0270 | E0272 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0270 | E0290 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0270 | E0291 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0270 | E0292 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0270 | E0293 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0270 | E0294 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0270 | E0295 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E0270 | E0296 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0270 | E0297 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0270 | E0305 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0270 | E0310 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0271 | E0271 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0272 | E0272 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0273 | E0273 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0274 | E0274 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0275 | E0275 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0276 | E0276 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0277 | E0277 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0280 | E0280 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0290 | E0271 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0290 | E0272 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0290 | E0290 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0290 | E0291 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0290 | E0292 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0290 | E0293 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0290 | E0294 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0290 | E0295 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0290 | E0296 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0290 | E0297 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0291 | E0291 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0291 | E0292 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0291 | E0293 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0291 | E0294 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E0291 | E0295 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0291 | E0296 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0291 | E0297 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0292 | E0271 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0292 | E0272 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0292 | E0292 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0292 | E0293 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0292 | E0294 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0292 | E0295 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0292 | E0296 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0292 | E0297 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0293 | E0293 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0293 | E0294 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0293 | E0295 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0293 | E0296 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0293 | E0297 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0294 | E0271 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0294 | E0272 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0294 | E0294 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0294 | E0295 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0294 | E0296 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0294 | E0297 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0295 | E0295 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0295 | E0296 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0295 | E0297 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0296 | E0271 | BCBST | The edited code is considered an integral component of the listed hospital bed. |
| E0296 | E0272 | BCBST | The edited code is considered an integral component of the listed hospital bed. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|--------------------|----------------|--------|---|
| E0296 | E0296 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0296 | E0297 | BCBST | The edited hospital bed code is considered redundant to the listed hospital bed code. |
| E0297 | E0297 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0305 | E0305 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0310 | E0305 | BCBST | The edited side rail code is considered redundant to the listed side rail code. |
| E0310 | E0310 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0316 | E0316 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0350 | E0350 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0352 | E0352 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0370 | E0370 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0371 | E0371 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0372 | E0372 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0373 | E0373 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0424 | RR A4608 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0424 | RR A4615 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0424 | RR A4616 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0424 | RR A4617 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0424 | RR A4619 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0424 | RR A4620 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0424 | RR A7525 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0424 | E0424 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0424 | RR E0434 RR | CMS | Service, supply or equipment for column 2 code is incompatible with column 1 code for service, supply or equipment |
| E0424 | RR E0439 RR | CMS | Service, supply or equipment for column 2 code is incompatible with column 1 code for service, supply or equipment |
| E0424 | E0441 | BCBST | The edited code is often included as a component of the listed oxygen system; reimbursement may be appropriate if it is not a component of the listed system. |
| E0424 | RR E0441 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|--------------------|----------------|--------|---|
| E0424 | RR E0442 | CMS | Service, supply or equipment for column 2 code is incompatible with column 1 code for service, supply or equipment |
| E0424 | RR E0443 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0424 | RR E0444 | CMS | Service, supply or equipment for column 2 code is incompatible with column 1 code for service, supply or equipment |
| E0424 | RR E0455 RR | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0424 | RR E0455 NU | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0424 | RR E0455 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0424 | RR E0555 RR | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0424 | RR E0555 NU | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0424 | RR E0555 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0424 | RR E0580 RR | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0424 | RR E0580 NU | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0424 | RR E0580 UE | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0424 | RR E1353 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0424 | RR E1355 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0425 | E0424 RR | CMS | The edited oxygen system code is considered redundant to the listed oxygen system code. |
| E0425 | E0424 | BCBST | The edited gas system code is considered redundant to the listed gas system code. |
| E0425 | E0425 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0425 | E0434 RR | CMS | Service, supply or equipment for column 2 code is incompatible with column 1 code for service, supply or equipment |
| E0425 | E0435 | CMS | Service, supply or equipment for column 2 code is incompatible with column 1 code for service, supply or equipment |
| E0425 | E0439 RR | CMS | The edited oxygen system code is considered redundant to the listed oxygen system code. |
| E0425 | E0440 | CMS | The edited oxygen system code is considered redundant to the listed oxygen system code. |
| E0425 | E0441 | BCBST | The edited code is often included as a component of the listed oxygen system; reimbursement may be appropriate if it is not a component of the listed system. |
| E0425 | E0442 | CMS | Service, supply or equipment for column 2 code is incompatible with column 1 code for service, supply or equipment |
| E0430 | E0430 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0430 | E0431 RR | CMS | The edited oxygen system code is considered redundant to the listed oxygen system code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| E0430 | E0431 | BCBST | The edited gas system code is considered redundant to the listed gas system code. |
| E0430 | E0434 RR | CMS | The edited oxygen system code is considered redundant to the listed oxygen system code. |
| E0430 | E0443 | BCBST | The edited code is often included as a component of the listed oxygen system; reimbursement may be appropriate if it is not a component of the listed system. |
| E0430 | E0444 | CMS | Service, supply or equipment for column 2 code is incompatible with column 1 code for service, supply or equipment |
| E0431 | RR A4608 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0431 | RR A4615 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0431 | RR A4616 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0431 | RR A4617 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0431 | RR A4619 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0431 | RR A4620 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0431 | RR A7525 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0431 | RR E0431 RR | CMS | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0431 | E0431 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0431 | E0443 | BCBST | The edited code is often included as a component of the listed oxygen system; reimbursement may be appropriate if it is not a component of the listed system. |
| E0431 | RR E0455 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0431 | RR E0455 NU | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0431 | RR E0455 RR | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0431 | RR E0555 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0431 | RR E0555 RR | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0431 | RR E0555 NU | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0431 | RR E0580 NU | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0431 | RR E0580 RR | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0431 | RR E0580 UE | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0431 | RR E1353 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0431 | RR E1355 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| Comprehensive Code | Component Code | Source | Rationale |
|--------------------|----------------|--------|---|
| E0431 | RR K0738 RR | CMS | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0434 | RR A4608 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0434 | RR A4615 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0434 | RR A4616 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0434 | RR A4617 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0434 | RR A4619 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0434 | RR A4620 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0434 | RR A7525 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0434 | RR E0434 RR | CMS | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0434 | RR E0434 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0434 | RR E0444 | BCBST | The edited code is often included as a component of the listed oxygen system; reimbursement may be appropriate if it is not a component of the listed system. |
| E0434 | RR E0455 NU | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0434 | RR E0455 RR | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0434 | RR E0455 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0434 | RR E0555 RR | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0434 | RR E0555 NU | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0434 | RR E0555 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0434 | RR E0580 UE | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0434 | RR E0580 RR | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0434 | RR E0580 NU | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0434 | RR E1353 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0434 | RR E1355 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0435 | E0434 RR | CMS | The edited oxygen system code is considered redundant to the listed oxygen system code. |
| E0435 | E0434 | BCBST | The edited gas system code is considered redundant to the listed gas system code. |
| E0435 | E0435 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| E0435 | E0444 | BCBST | The edited code is often included as a component of the listed oxygen system; reimbursement may be appropriate if it is not a component of the listed system. |
| E0439 | RR A4608 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0439 | RR A4615 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0439 | RR A4616 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0439 | RR A4617 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0439 | RR A4619 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0439 | RR A4620 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0439 | RR A7525 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0439 | E0439 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0439 | RR E0441 | CMS | Service, supply or equipment for column 2 code is incompatible with column 1 code for service, supply or equipment |
| E0439 | E0442 | BCBST | The edited code is often included as a component of the listed oxygen system; reimbursement may be appropriate if it is not a component of the listed system. |
| E0439 | RR E0442 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0439 | RR E0443 | CMS | Service, supply or equipment for column 2 code is incompatible with column 1 code for service, supply or equipment |
| E0439 | RR E0444 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0439 | RR E0455 NU | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0439 | RR E0455 RR | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0439 | RR E0455 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0439 | RR E0555 NU | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0439 | RR E0555 RR | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0439 | RR E0555 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0439 | RR E0555 RR | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0439 | RR E0555 NU | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0439 | RR E0555 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0439 | RR E0580 NU | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| E0439 RR | E0580 UE | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0439 RR | E0580 RR | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0439 RR | E1353 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0439 RR | E1355 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E0440 | E0439 RR | CMS | The edited oxygen system code is considered redundant to the listed oxygen system code. |
| E0440 | E0439 | BCBST | The edited gas system code is considered redundant to the listed gas system code. |
| E0440 | E0440 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0440 | E0442 | BCBST | The edited code is often included as a component of the listed oxygen system; reimbursement may be appropriate if it is not a component of the listed system. |
| E0441 | E0441 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0442 | E0442 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0443 | E0441 | BCBST | The edited oxygen code is considered redundant to the listed oxygen code. |
| E0443 | E0442 | BCBST | The edited oxygen code is considered redundant to the listed oxygen code. |
| E0443 | E0443 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0444 | E0441 | BCBST | The edited oxygen code is considered redundant to the listed oxygen code. |
| E0444 | E0442 | BCBST | The edited oxygen code is considered redundant to the listed oxygen code. |
| E0444 | E0443 | BCBST | The edited oxygen code is considered redundant to the listed oxygen code. |
| E0444 | E0444 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0445 | E0445 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0450 | E0450 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0450 | E0460 | BCBST | The edited ventilator code is considered redundant to the listed ventilator code. |
| E0450 | E0461 | BCBST | The edited ventilator code is considered redundant item to the listed ventilator code in that it represents an alternative device for ventilation. |
| E0455 | E0455 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0457 | E0457 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0459 | E0459 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0460 | E0460 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0460 | E0461 | BCBST | The edited ventilator code is considered redundant item to the listed ventilator code in that it represents an alternative device for ventilation. |
| E0461 | E0461 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E0462 | E0462 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0480 | E0480 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0481 | E0481 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0482 | E0482 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0483 | E0483 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0484 | E0484 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0500 | E0500 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0550 | E0550 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0550 | E0555 | BCBST | The edited humidifier code is considered redundant to the listed humidifier code. |
| E0550 | E0560 | BCBST | The edited humidifier code is considered redundant to the listed humidifier code. |
| E0555 | E0555 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0560 | E0560 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0565 | E0565 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0570 | E0570 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0571 | E0571 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0572 | E0572 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0574 | E0574 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0575 | E0574 | BCBST | The edited code is considered redundant to or an integral component of the listed code. |
| E0575 | E0575 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0580 | E0580 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0585 | E0585 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0600 | E0600 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0601 | E0601 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0602 | E0602 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0603 | E0602 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |

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| Comprehensive Code | Component Code | Source | Rationale | |
|---------------------------|-----------------------|---------------|--|--|
| E0603 | E0603 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. | |
| E0604 | E0602 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. | |
| E0604 | E0603 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. | |
| E0604 | E0604 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. | |
| E0605 | E0605 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. | |
| E0606 | E0606 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. | |
| E0607 | E0607 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. | |
| E0610 | E0610 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. | |
| E0615 | E0610 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. | |
| E0615 | E0615 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. | |
| E0616 | E0616 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. | |
| E0617 | E0617 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. | |
| E0618 | NU | A4556 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0618 | RR | A4556 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0618 | RR | A4557 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0618 | NU | A4557 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0618 | RR | A4558 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0618 | NU | A4558 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0618 | NU | A4595 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0618 | RR | A4595 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0618 | NU | A4630 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0618 | RR | A4630 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0618 | | E0618 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0619 | NU | A4556 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0619 | RR | A4556 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0619 | RR | A4557 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0619 | NU | A4557 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0619 | RR | A4558 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0619 | NU | A4558 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0619 | NU | A4595 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0619 | RR | A4595 | CMS | Edited code is a component of the listed code and is not separately billable. |

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|--------------------|----------------|--------|--|
| E0619 | NU A4630 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0619 | RR A4630 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0619 | E0618 | BCBST | Incompatible code combination or component. |
| E0619 | E0619 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0620 | E0620 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0621 | E0621 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0625 | E0625 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0627 | E0627 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0628 | E0628 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0629 | E0629 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0630 | E0630 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0635 | E0635 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0636 | E0636 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0650 | E0650 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0651 | E0650 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| E0651 | E0651 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0652 | E0650 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| E0652 | E0651 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| E0652 | E0652 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0655 | E0655 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0660 | E0660 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0660 | E0666 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| E0665 | E0655 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| E0665 | E0665 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0666 | E0666 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0667 | E0667 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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|---------------------------|-----------------------|---------------|--|---|
| E0667 | E0669 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. | |
| E0668 | E0668 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. | |
| E0669 | E0669 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. | |
| E0671 | E0671 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. | |
| E0671 | E0673 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. | |
| E0672 | E0672 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. | |
| E0673 | E0673 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. | |
| E0691 | E0691 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. | |
| E0692 | E0691 | BCBST | This service, supply, or equipment is considered a component of the listed code or represents an alternative service, supply or equipment which is generally redundant to the listed code. | |
| E0692 | E0692 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. | |
| E0693 | E0691 | BCBST | This service, supply, or equipment is considered a component of the listed code or represents an alternative service, supply or equipment which is generally redundant to the listed code. | |
| E0693 | E0692 | BCBST | This service, supply, or equipment is considered a component of the listed code or represents an alternative service, supply or equipment which is generally redundant to the listed code. | |
| E0693 | E0693 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. | |
| E0694 | E0691 | BCBST | This service, supply, or equipment is considered a component of the listed code or represents an alternative service, supply or equipment which is generally redundant to the listed code. | |
| E0694 | E0692 | BCBST | This service, supply, or equipment is considered a component of the listed code or represents an alternative service, supply or equipment which is generally redundant to the listed code. | |
| E0694 | E0693 | BCBST | This service, supply, or equipment is considered a component of the listed code or represents an alternative service, supply or equipment which is generally redundant to the listed code. | |
| E0694 | E0694 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. | |
| E0700 | E0700 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. | |
| E0710 | E0710 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. | |
| E0720 | RR | A4556 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0720 | NU | A4556 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0720 | RR | A4557 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0720 | NU | A4557 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0720 | NU | A4558 | CMS | Edited code is a component of the listed code and is not separately billable. |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E0720 | RR A4558 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0720 | NU A4595 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0720 | RR A4595 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0720 | RR A4630 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0720 | NU A4630 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0720 | E0720 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0730 | NU A4556 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0730 | RR A4556 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0730 | RR A4557 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0730 | NU A4557 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0730 | RR A4558 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0730 | NU A4558 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0730 | NU A4595 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0730 | RR A4595 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0730 | RR A4630 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0730 | NU A4630 | CMS | Edited code is a component of the listed code and is not separately billable. |
| E0730 | E0720 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| E0730 | E0730 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0731 | E0731 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0740 | E0740 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0744 | E0744 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0745 | E0745 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0746 | E0746 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0747 | E0747 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0748 | E0748 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0749 | E0749 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0755 | E0755 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0760 | E0760 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0761 | E0761 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0765 | E0765 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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|---------------------------|-----------------------|---------------|--|
| E0776 | E0776 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0779 | E0779 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0779 | E0780 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| E0780 | E0780 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0781 | E0779 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| E0781 | E0780 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| E0781 | E0781 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| E0781 | E0782 | NCCI | NCCI Mutually exclusive procedures |
| E0782 | E0782 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| E0783 | E0782 | BCBST | The edited code is considered redundant to or an integral component of the listed code. |
| E0783 | E0783 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0783 | E0786 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| E0784 | E0784 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0785 | E0785 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0786 | E0786 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0791 | E0791 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0840 | E0840 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0850 | E0840 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| E0850 | E0850 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0855 | E0855 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0860 | E0860 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0870 | E0870 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0880 | E0870 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| E0880 | E0880 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0890 | E0890 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E0900 | E0890 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| E0900 | E0900 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0910 | E0910 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0920 | E0920 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0930 | E0920 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| E0930 | E0930 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0935 | E0935 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0940 | E0940 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0941 | E0941 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0942 | E0942 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0944 | E0944 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0945 | E0945 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0946 | E0946 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0947 | E0947 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0948 | E0948 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0950 | E0950 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0958 | E0958 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0959 | E0959 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0961 | E0961 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0966 | E0966 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0967 | E0967 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0968 | E0968 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0969 | E0969 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0970 | E0970 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E0971 | E0971 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0973 | E0973 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0974 | E0974 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0978 | E0978 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0980 | E0980 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E0992 | E0992 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1011 | E1011 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1014 | E1014 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1020 | E1020 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1031 | E1031 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1035 | E1035 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1050 | E1050 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1050 | E1060 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1070 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1083 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1084 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1085 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1086 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1087 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1088 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1089 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1090 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1092 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1093 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1100 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1110 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1130 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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Print Date: 08/11/2008

BlueCross BlueShield of Tennessee-Coding Bundling Rules

Source: PNC-CARR

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1050 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1050 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1060 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1060 | E1070 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1083 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1084 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1085 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1086 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1087 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1088 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1089 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1090 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1092 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1093 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1100 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1110 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1130 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1060 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1060 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1070 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1070 | E1083 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1084 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1085 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1086 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1087 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1088 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1089 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1090 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1092 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1093 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1100 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1070 | E1110 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1130 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1070 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1083 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1083 | E1084 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1085 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1086 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1087 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1088 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1089 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1090 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1092 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1083 | E1093 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1100 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1110 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1130 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1083 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1084 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1084 | E1085 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1086 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1087 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1088 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1089 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1090 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1084 | E1092 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1093 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1100 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1110 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1130 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1084 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1085 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1085 | E1086 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1087 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1088 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1089 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1090 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1085 | E1092 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1093 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1100 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1110 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1130 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1085 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1086 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1086 | E1087 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1088 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1089 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1090 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1092 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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Print Date: 08/11/2008

BlueCross BlueShield of Tennessee-Coding Bundling Rules

Source: PNC-CARR

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1086 | E1093 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1100 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1110 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1130 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1086 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1087 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1087 | E1088 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1089 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1090 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1092 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1093 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1100 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1087 | E1110 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1130 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1087 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1088 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1088 | E1089 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1090 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1092 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1093 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1100 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1110 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1130 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1088 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1088 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1089 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1089 | E1090 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1092 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1093 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1100 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1110 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1130 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1089 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1089 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1090 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1090 | E1092 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1093 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1100 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1110 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1130 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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BlueCross BlueShield of Tennessee-Coding Bundling Rules

Source: PNC-CARR

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1090 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1090 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1092 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1092 | E1093 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1100 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1110 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1130 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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Code bundling rules subject to additions, deletions, and/or revisions on a quarterly basis.

BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1092 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1092 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1093 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1093 | E1100 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1110 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1130 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1093 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1093 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1100 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1100 | E1110 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1130 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1100 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1110 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1110 | E1130 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1110 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1110 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1130 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1130 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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Print Date: 08/11/2008

BlueCross BlueShield of Tennessee-Coding Bundling Rules

Source: PNC-CARR

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1130 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1130 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1140 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1140 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1140 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1140 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1150 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1150 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1150 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1160 | E1160 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1160 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1160 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1160 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1160 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1160 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1160 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1160 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| E1160 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1160 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1160 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1160 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1160 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1160 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1160 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1160 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1160 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1160 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1160 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1160 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1160 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1160 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1160 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1160 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1160 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E0967 | BCBST | Edited code is a component of the listed code |
| E1161 | E0981 | BCBST | Edited code is a component of the listed code |
| E1161 | E0982 | BCBST | Edited code is a component of the listed code |
| E1161 | E0995 | BCBST | Edited code is a component of the listed code |
| E1161 | E1050 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1060 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1070 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1083 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1084 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1085 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1086 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1087 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1088 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1089 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1090 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1092 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1093 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1100 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1110 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1130 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1161 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1161 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1161 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1231 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1232 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1233 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1234 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1235 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1236 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1237 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1238 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | E2205 | BCBST | Edited code is a component of the listed code |
| E1161 | E2206 | BCBST | Edited code is a component of the listed code |
| E1161 | E2210 | BCBST | Edited code is a component of the listed code |
| E1161 | E2220 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1161 | E2221 | BCBST | Edited code is a component of the listed code |
| E1161 | E2222 | BCBST | Edited code is a component of the listed code |
| E1161 | E2223 | BCBST | Edited code is a component of the listed code |
| E1161 | E2224 | BCBST | Edited code is a component of the listed code |
| E1161 | E2225 | BCBST | Edited code is a component of the listed code |
| E1161 | E2226 | BCBST | Edited code is a component of the listed code |
| E1161 | K0001 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | K0002 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | K0003 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | K0004 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | K0005 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | K0006 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | K0007 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | K0009 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | K0010 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | K0011 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | K0012 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | K0014 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1161 | K0015 | BCBST | Edited code is a component of the listed code |
| E1161 | K0017 | BCBST | Edited code is a component of the listed code |
| E1161 | K0018 | BCBST | Edited code is a component of the listed code |
| E1161 | K0019 | BCBST | Edited code is a component of the listed code |
| E1161 | K0042 | BCBST | Edited code is a component of the listed code |
| E1161 | K0043 | BCBST | Edited code is a component of the listed code |
| E1161 | K0044 | BCBST | Edited code is a component of the listed code |
| E1161 | K0045 | BCBST | Edited code is a component of the listed code |
| E1161 | K0046 | BCBST | Edited code is a component of the listed code |
| E1161 | K0047 | BCBST | Edited code is a component of the listed code |
| E1161 | K0050 | BCBST | Edited code is a component of the listed code |
| E1161 | K0052 | BCBST | Edited code is a component of the listed code |
| E1161 | K0069 | BCBST | Edited code is a component of the listed code |
| E1161 | K0070 | BCBST | Edited code is a component of the listed code |
| E1161 | K0071 | BCBST | Edited code is a component of the listed code |
| E1161 | K0072 | BCBST | Edited code is a component of the listed code |
| E1170 | E1170 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1170 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1170 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1170 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1170 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1170 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1170 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1170 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1170 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1170 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1170 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1170 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1170 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1170 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1170 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1170 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1170 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1170 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1170 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1170 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1170 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1170 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1170 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1170 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1171 | E1171 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1171 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1171 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1171 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1171 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1171 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1171 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1171 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1171 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1171 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1171 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1171 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1171 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1171 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1171 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1171 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1171 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1171 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1171 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1171 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1171 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1171 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1171 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1172 | E1172 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1172 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1172 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1172 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1172 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1172 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1172 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1172 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1172 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1172 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1172 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1172 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1172 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1172 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1172 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1172 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1172 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1172 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1172 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1172 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1172 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1172 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1180 | E1180 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1180 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1180 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1180 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1180 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1180 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1180 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1180 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1180 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1180 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1180 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1180 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1180 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1180 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1180 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1180 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1180 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1180 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1180 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1180 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1180 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1190 | E1190 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1190 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1190 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1190 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1190 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1190 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1190 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1190 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1190 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1190 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1190 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1190 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1190 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1190 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1190 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1190 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1190 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1190 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1190 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1190 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1195 | E1195 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1195 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1195 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1195 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1195 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1195 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1195 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1195 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1195 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1195 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1195 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1195 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1195 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1195 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1195 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1195 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1195 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1195 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1195 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1200 | E1200 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1200 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1200 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1200 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1200 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1200 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1200 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1200 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1200 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1200 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1200 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1200 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1200 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1200 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1200 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1200 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1200 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1200 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1220 | E1220 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1220 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1220 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1220 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1220 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1220 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1220 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1220 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1220 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1220 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1220 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1220 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1220 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1221 | E1221 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1221 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1221 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1221 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1221 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1221 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1221 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1221 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1221 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1221 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1221 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1221 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1222 | E1222 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1222 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1222 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1222 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1222 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1222 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1222 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1222 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1222 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1222 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1222 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1223 | E1223 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1223 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1223 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1223 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1223 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1223 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1223 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1223 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1223 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1223 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1224 | E1224 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1224 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1224 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1224 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1224 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1224 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1224 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1224 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1224 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1225 | E1225 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1226 | E1226 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1227 | E1227 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1228 | E1228 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1229 | E0967 | BCBST | Edited code is a component of the listed code |
| E1229 | E0981 | BCBST | Edited code is a component of the listed code |
| E1229 | E0982 | BCBST | Edited code is a component of the listed code |
| E1229 | E0995 | BCBST | Edited code is a component of the listed code |
| E1229 | E2205 | BCBST | Edited code is a component of the listed code |
| E1229 | E2206 | BCBST | Edited code is a component of the listed code |
| E1229 | E2210 | BCBST | Edited code is a component of the listed code |
| E1229 | E2220 | BCBST | Edited code is a component of the listed code |
| E1229 | E2221 | BCBST | Edited code is a component of the listed code |
| E1229 | E2222 | BCBST | Edited code is a component of the listed code |
| E1229 | E2223 | BCBST | Edited code is a component of the listed code |
| E1229 | E2224 | BCBST | Edited code is a component of the listed code |
| E1229 | E2225 | BCBST | Edited code is a component of the listed code |
| E1229 | E2226 | BCBST | Edited code is a component of the listed code |
| E1229 | K0015 | BCBST | Edited code is a component of the listed code |
| E1229 | K0017 | BCBST | Edited code is a component of the listed code |
| E1229 | K0018 | BCBST | Edited code is a component of the listed code |
| E1229 | K0019 | BCBST | Edited code is a component of the listed code |
| E1229 | K0042 | BCBST | Edited code is a component of the listed code |
| E1229 | K0043 | BCBST | Edited code is a component of the listed code |
| E1229 | K0044 | BCBST | Edited code is a component of the listed code |
| E1229 | K0045 | BCBST | Edited code is a component of the listed code |
| E1229 | K0046 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1229 | K0047 | BCBST | Edited code is a component of the listed code |
| E1229 | K0050 | BCBST | Edited code is a component of the listed code |
| E1229 | K0052 | BCBST | Edited code is a component of the listed code |
| E1229 | K0069 | BCBST | Edited code is a component of the listed code |
| E1229 | K0070 | BCBST | Edited code is a component of the listed code |
| E1229 | K0071 | BCBST | Edited code is a component of the listed code |
| E1229 | K0072 | BCBST | Edited code is a component of the listed code |
| E1230 | E1230 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1231 | E0967 | BCBST | Edited code is a component of the listed code |
| E1231 | E0981 | BCBST | Edited code is a component of the listed code |
| E1231 | E0982 | BCBST | Edited code is a component of the listed code |
| E1231 | E0995 | BCBST | Edited code is a component of the listed code |
| E1231 | E1050 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1060 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1070 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1083 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1084 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1085 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1086 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1087 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1088 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1089 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1090 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1092 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1093 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1100 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1110 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1130 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1231 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1231 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1231 | E1232 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1233 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1234 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1235 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1236 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1237 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1238 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | E2205 | BCBST | Edited code is a component of the listed code |
| E1231 | E2206 | BCBST | Edited code is a component of the listed code |
| E1231 | E2210 | BCBST | Edited code is a component of the listed code |
| E1231 | E2220 | BCBST | Edited code is a component of the listed code |
| E1231 | E2221 | BCBST | Edited code is a component of the listed code |
| E1231 | E2222 | BCBST | Edited code is a component of the listed code |
| E1231 | E2223 | BCBST | Edited code is a component of the listed code |
| E1231 | E2224 | BCBST | Edited code is a component of the listed code |
| E1231 | E2225 | BCBST | Edited code is a component of the listed code |
| E1231 | E2226 | BCBST | Edited code is a component of the listed code |
| E1231 | K0001 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | K0002 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | K0003 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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Print Date: 08/11/2008

BlueCross BlueShield of Tennessee-Coding Bundling Rules

Source: PNC-CARR

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| E1231 | K0004 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | K0005 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | K0006 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | K0007 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | K0009 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | K0010 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | K0011 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | K0012 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | K0014 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1231 | K0015 | BCBST | Edited code is a component of the listed code |
| E1231 | K0017 | BCBST | Edited code is a component of the listed code |
| E1231 | K0018 | BCBST | Edited code is a component of the listed code |
| E1231 | K0019 | BCBST | Edited code is a component of the listed code |
| E1231 | K0042 | BCBST | Edited code is a component of the listed code |
| E1231 | K0043 | BCBST | Edited code is a component of the listed code |
| E1231 | K0044 | BCBST | Edited code is a component of the listed code |
| E1231 | K0045 | BCBST | Edited code is a component of the listed code |
| E1231 | K0046 | BCBST | Edited code is a component of the listed code |
| E1231 | K0047 | BCBST | Edited code is a component of the listed code |
| E1231 | K0050 | BCBST | Edited code is a component of the listed code |
| E1231 | K0052 | BCBST | Edited code is a component of the listed code |
| E1231 | K0069 | BCBST | Edited code is a component of the listed code |
| E1231 | K0070 | BCBST | Edited code is a component of the listed code |
| E1231 | K0071 | BCBST | Edited code is a component of the listed code |
| E1231 | K0072 | BCBST | Edited code is a component of the listed code |
| E1232 | E0967 | BCBST | Edited code is a component of the listed code |
| E1232 | E0981 | BCBST | Edited code is a component of the listed code |
| E1232 | E0982 | BCBST | Edited code is a component of the listed code |
| E1232 | E0995 | BCBST | Edited code is a component of the listed code |
| E1232 | E1050 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1060 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1070 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1083 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1084 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1085 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1086 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1087 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1088 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1089 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1232 | E1090 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1092 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1093 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1100 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1110 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1130 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1232 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1232 | E1233 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1234 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1235 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1236 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1237 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1238 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| E1232 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | E2205 | BCBST | Edited code is a component of the listed code |
| E1232 | E2206 | BCBST | Edited code is a component of the listed code |
| E1232 | E2210 | BCBST | Edited code is a component of the listed code |
| E1232 | E2220 | BCBST | Edited code is a component of the listed code |
| E1232 | E2221 | BCBST | Edited code is a component of the listed code |
| E1232 | E2222 | BCBST | Edited code is a component of the listed code |
| E1232 | E2223 | BCBST | Edited code is a component of the listed code |
| E1232 | E2224 | BCBST | Edited code is a component of the listed code |
| E1232 | E2225 | BCBST | Edited code is a component of the listed code |
| E1232 | E2226 | BCBST | Edited code is a component of the listed code |
| E1232 | K0001 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | K0002 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | K0003 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | K0004 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | K0005 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | K0006 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | K0007 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | K0009 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | K0010 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | K0011 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | K0012 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | K0014 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1232 | K0015 | BCBST | Edited code is a component of the listed code |
| E1232 | K0017 | BCBST | Edited code is a component of the listed code |
| E1232 | K0018 | BCBST | Edited code is a component of the listed code |
| E1232 | K0019 | BCBST | Edited code is a component of the listed code |
| E1232 | K0042 | BCBST | Edited code is a component of the listed code |
| E1232 | K0043 | BCBST | Edited code is a component of the listed code |
| E1232 | K0044 | BCBST | Edited code is a component of the listed code |
| E1232 | K0045 | BCBST | Edited code is a component of the listed code |
| E1232 | K0046 | BCBST | Edited code is a component of the listed code |
| E1232 | K0047 | BCBST | Edited code is a component of the listed code |
| E1232 | K0050 | BCBST | Edited code is a component of the listed code |
| E1232 | K0052 | BCBST | Edited code is a component of the listed code |
| E1232 | K0069 | BCBST | Edited code is a component of the listed code |
| E1232 | K0070 | BCBST | Edited code is a component of the listed code |
| E1232 | K0071 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| E1232 | K0072 | BCBST | Edited code is a component of the listed code |
| E1233 | E0967 | BCBST | Edited code is a component of the listed code |
| E1233 | E0981 | BCBST | Edited code is a component of the listed code |
| E1233 | E0982 | BCBST | Edited code is a component of the listed code |
| E1233 | E0995 | BCBST | Edited code is a component of the listed code |
| E1233 | E1050 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1060 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1070 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1083 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1084 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1085 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1086 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1087 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1088 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1089 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1090 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1092 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1093 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1100 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1110 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1130 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1233 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1233 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1233 | E1234 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1235 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1236 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1237 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1238 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | E2205 | BCBST | Edited code is a component of the listed code |
| E1233 | E2206 | BCBST | Edited code is a component of the listed code |
| E1233 | E2210 | BCBST | Edited code is a component of the listed code |
| E1233 | E2220 | BCBST | Edited code is a component of the listed code |
| E1233 | E2221 | BCBST | Edited code is a component of the listed code |
| E1233 | E2222 | BCBST | Edited code is a component of the listed code |
| E1233 | E2223 | BCBST | Edited code is a component of the listed code |
| E1233 | E2224 | BCBST | Edited code is a component of the listed code |
| E1233 | E2225 | BCBST | Edited code is a component of the listed code |
| E1233 | E2226 | BCBST | Edited code is a component of the listed code |
| E1233 | K0001 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | K0002 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | K0003 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | K0004 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | K0005 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | K0006 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | K0007 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | K0009 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | K0010 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | K0011 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | K0012 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | K0014 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1233 | K0015 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| E1233 | K0017 | BCBST | Edited code is a component of the listed code |
| E1233 | K0018 | BCBST | Edited code is a component of the listed code |
| E1233 | K0019 | BCBST | Edited code is a component of the listed code |
| E1233 | K0042 | BCBST | Edited code is a component of the listed code |
| E1233 | K0043 | BCBST | Edited code is a component of the listed code |
| E1233 | K0044 | BCBST | Edited code is a component of the listed code |
| E1233 | K0045 | BCBST | Edited code is a component of the listed code |
| E1233 | K0046 | BCBST | Edited code is a component of the listed code |
| E1233 | K0047 | BCBST | Edited code is a component of the listed code |
| E1233 | K0050 | BCBST | Edited code is a component of the listed code |
| E1233 | K0052 | BCBST | Edited code is a component of the listed code |
| E1233 | K0069 | BCBST | Edited code is a component of the listed code |
| E1233 | K0070 | BCBST | Edited code is a component of the listed code |
| E1233 | K0071 | BCBST | Edited code is a component of the listed code |
| E1233 | K0072 | BCBST | Edited code is a component of the listed code |
| E1234 | E0967 | BCBST | Edited code is a component of the listed code |
| E1234 | E0981 | BCBST | Edited code is a component of the listed code |
| E1234 | E0982 | BCBST | Edited code is a component of the listed code |
| E1234 | E0995 | BCBST | Edited code is a component of the listed code |
| E1234 | E1050 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1060 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1070 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1083 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1084 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1085 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1086 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1087 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1088 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1089 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1090 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1092 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1093 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1100 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1110 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1130 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1234 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1234 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1234 | E1235 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1236 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1237 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1238 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | E2205 | BCBST | Edited code is a component of the listed code |
| E1234 | E2206 | BCBST | Edited code is a component of the listed code |
| E1234 | E2210 | BCBST | Edited code is a component of the listed code |
| E1234 | E2220 | BCBST | Edited code is a component of the listed code |
| E1234 | E2221 | BCBST | Edited code is a component of the listed code |
| E1234 | E2222 | BCBST | Edited code is a component of the listed code |
| E1234 | E2223 | BCBST | Edited code is a component of the listed code |
| E1234 | E2224 | BCBST | Edited code is a component of the listed code |
| E1234 | E2225 | BCBST | Edited code is a component of the listed code |
| E1234 | E2226 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| E1234 | K0001 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | K0002 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | K0003 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | K0004 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | K0005 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | K0006 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | K0007 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | K0009 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | K0010 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | K0011 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | K0012 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | K0014 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1234 | K0015 | BCBST | Edited code is a component of the listed code |
| E1234 | K0017 | BCBST | Edited code is a component of the listed code |
| E1234 | K0018 | BCBST | Edited code is a component of the listed code |
| E1234 | K0019 | BCBST | Edited code is a component of the listed code |
| E1234 | K0042 | BCBST | Edited code is a component of the listed code |
| E1234 | K0043 | BCBST | Edited code is a component of the listed code |
| E1234 | K0044 | BCBST | Edited code is a component of the listed code |
| E1234 | K0045 | BCBST | Edited code is a component of the listed code |
| E1234 | K0046 | BCBST | Edited code is a component of the listed code |
| E1234 | K0047 | BCBST | Edited code is a component of the listed code |
| E1234 | K0050 | BCBST | Edited code is a component of the listed code |
| E1234 | K0052 | BCBST | Edited code is a component of the listed code |
| E1234 | K0069 | BCBST | Edited code is a component of the listed code |
| E1234 | K0070 | BCBST | Edited code is a component of the listed code |
| E1234 | K0071 | BCBST | Edited code is a component of the listed code |
| E1234 | K0072 | BCBST | Edited code is a component of the listed code |
| E1235 | E0967 | BCBST | Edited code is a component of the listed code |
| E1235 | E0981 | BCBST | Edited code is a component of the listed code |
| E1235 | E0982 | BCBST | Edited code is a component of the listed code |
| E1235 | E0995 | BCBST | Edited code is a component of the listed code |
| E1235 | E1050 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1060 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1070 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1083 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1084 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1085 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1086 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1235 | E1087 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1088 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1089 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1090 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1092 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1093 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1100 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1110 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1130 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1235 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1235 | E1236 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1237 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1238 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| E1235 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | E2205 | BCBST | Edited code is a component of the listed code |
| E1235 | E2206 | BCBST | Edited code is a component of the listed code |
| E1235 | E2210 | BCBST | Edited code is a component of the listed code |
| E1235 | E2220 | BCBST | Edited code is a component of the listed code |
| E1235 | E2221 | BCBST | Edited code is a component of the listed code |
| E1235 | E2222 | BCBST | Edited code is a component of the listed code |
| E1235 | E2223 | BCBST | Edited code is a component of the listed code |
| E1235 | E2224 | BCBST | Edited code is a component of the listed code |
| E1235 | E2225 | BCBST | Edited code is a component of the listed code |
| E1235 | E2226 | BCBST | Edited code is a component of the listed code |
| E1235 | K0001 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | K0002 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | K0003 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | K0004 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | K0005 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | K0006 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | K0007 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | K0009 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | K0010 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | K0011 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | K0012 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | K0014 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1235 | K0015 | BCBST | Edited code is a component of the listed code |
| E1235 | K0017 | BCBST | Edited code is a component of the listed code |
| E1235 | K0018 | BCBST | Edited code is a component of the listed code |
| E1235 | K0019 | BCBST | Edited code is a component of the listed code |
| E1235 | K0042 | BCBST | Edited code is a component of the listed code |
| E1235 | K0043 | BCBST | Edited code is a component of the listed code |
| E1235 | K0044 | BCBST | Edited code is a component of the listed code |
| E1235 | K0045 | BCBST | Edited code is a component of the listed code |
| E1235 | K0046 | BCBST | Edited code is a component of the listed code |
| E1235 | K0047 | BCBST | Edited code is a component of the listed code |
| E1235 | K0050 | BCBST | Edited code is a component of the listed code |
| E1235 | K0052 | BCBST | Edited code is a component of the listed code |
| E1235 | K0069 | BCBST | Edited code is a component of the listed code |
| E1235 | K0070 | BCBST | Edited code is a component of the listed code |
| E1235 | K0071 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| E1235 | K0072 | BCBST | Edited code is a component of the listed code |
| E1236 | E0967 | BCBST | Edited code is a component of the listed code |
| E1236 | E0981 | BCBST | Edited code is a component of the listed code |
| E1236 | E0982 | BCBST | Edited code is a component of the listed code |
| E1236 | E0995 | BCBST | Edited code is a component of the listed code |
| E1236 | E1050 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1060 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1070 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1083 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1084 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1085 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1086 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1087 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1088 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1089 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1090 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1092 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1093 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1100 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1110 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1130 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1236 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1236 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1236 | E1237 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1238 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | E2205 | BCBST | Edited code is a component of the listed code |
| E1236 | E2206 | BCBST | Edited code is a component of the listed code |
| E1236 | E2210 | BCBST | Edited code is a component of the listed code |
| E1236 | E2220 | BCBST | Edited code is a component of the listed code |
| E1236 | E2221 | BCBST | Edited code is a component of the listed code |
| E1236 | E2222 | BCBST | Edited code is a component of the listed code |
| E1236 | E2223 | BCBST | Edited code is a component of the listed code |
| E1236 | E2224 | BCBST | Edited code is a component of the listed code |
| E1236 | E2225 | BCBST | Edited code is a component of the listed code |
| E1236 | E2226 | BCBST | Edited code is a component of the listed code |
| E1236 | K0001 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | K0002 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | K0003 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | K0004 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | K0005 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | K0006 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | K0007 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | K0009 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | K0010 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | K0011 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | K0012 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | K0014 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1236 | K0015 | BCBST | Edited code is a component of the listed code |
| E1236 | K0017 | BCBST | Edited code is a component of the listed code |
| E1236 | K0018 | BCBST | Edited code is a component of the listed code |
| E1236 | K0019 | BCBST | Edited code is a component of the listed code |

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Print Date: 08/11/2008

BlueCross BlueShield of Tennessee-Coding Bundling Rules

Source: PNC-CARR

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| E1236 | K0042 | BCBST | Edited code is a component of the listed code |
| E1236 | K0043 | BCBST | Edited code is a component of the listed code |
| E1236 | K0044 | BCBST | Edited code is a component of the listed code |
| E1236 | K0045 | BCBST | Edited code is a component of the listed code |
| E1236 | K0046 | BCBST | Edited code is a component of the listed code |
| E1236 | K0047 | BCBST | Edited code is a component of the listed code |
| E1236 | K0050 | BCBST | Edited code is a component of the listed code |
| E1236 | K0052 | BCBST | Edited code is a component of the listed code |
| E1236 | K0069 | BCBST | Edited code is a component of the listed code |
| E1236 | K0070 | BCBST | Edited code is a component of the listed code |
| E1236 | K0071 | BCBST | Edited code is a component of the listed code |
| E1236 | K0072 | BCBST | Edited code is a component of the listed code |
| E1237 | E0967 | BCBST | Edited code is a component of the listed code |
| E1237 | E0981 | BCBST | Edited code is a component of the listed code |
| E1237 | E0982 | BCBST | Edited code is a component of the listed code |
| E1237 | E0995 | BCBST | Edited code is a component of the listed code |
| E1237 | E1050 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1060 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1070 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1083 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1084 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1085 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1086 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1087 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1088 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1089 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1090 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1092 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1093 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1100 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1110 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1130 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1237 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1237 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1237 | E1238 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | E2205 | BCBST | Edited code is a component of the listed code |
| E1237 | E2206 | BCBST | Edited code is a component of the listed code |
| E1237 | E2210 | BCBST | Edited code is a component of the listed code |
| E1237 | E2220 | BCBST | Edited code is a component of the listed code |
| E1237 | E2221 | BCBST | Edited code is a component of the listed code |
| E1237 | E2222 | BCBST | Edited code is a component of the listed code |
| E1237 | E2223 | BCBST | Edited code is a component of the listed code |
| E1237 | E2224 | BCBST | Edited code is a component of the listed code |
| E1237 | E2225 | BCBST | Edited code is a component of the listed code |
| E1237 | E2226 | BCBST | Edited code is a component of the listed code |
| E1237 | K0001 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | K0002 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | K0003 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | K0004 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | K0005 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | K0006 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| E1237 | K0007 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | K0009 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | K0010 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | K0011 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | K0012 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | K0014 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1237 | K0015 | BCBST | Edited code is a component of the listed code |
| E1237 | K0017 | BCBST | Edited code is a component of the listed code |
| E1237 | K0018 | BCBST | Edited code is a component of the listed code |
| E1237 | K0019 | BCBST | Edited code is a component of the listed code |
| E1237 | K0042 | BCBST | Edited code is a component of the listed code |
| E1237 | K0043 | BCBST | Edited code is a component of the listed code |
| E1237 | K0044 | BCBST | Edited code is a component of the listed code |
| E1237 | K0045 | BCBST | Edited code is a component of the listed code |
| E1237 | K0046 | BCBST | Edited code is a component of the listed code |
| E1237 | K0047 | BCBST | Edited code is a component of the listed code |
| E1237 | K0050 | BCBST | Edited code is a component of the listed code |
| E1237 | K0052 | BCBST | Edited code is a component of the listed code |
| E1237 | K0069 | BCBST | Edited code is a component of the listed code |
| E1237 | K0070 | BCBST | Edited code is a component of the listed code |
| E1237 | K0071 | BCBST | Edited code is a component of the listed code |
| E1237 | K0072 | BCBST | Edited code is a component of the listed code |
| E1238 | E0967 | BCBST | Edited code is a component of the listed code |
| E1238 | E0981 | BCBST | Edited code is a component of the listed code |
| E1238 | E0982 | BCBST | Edited code is a component of the listed code |
| E1238 | E0995 | BCBST | Edited code is a component of the listed code |
| E1238 | E1050 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1060 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1070 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1083 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1084 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1085 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1086 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1087 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1088 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1089 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1090 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1092 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1093 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1238 | E1100 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1110 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1130 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1140 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1150 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1160 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1170 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1171 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1172 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1180 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1190 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1195 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1200 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1210 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1211 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1212 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1213 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1220 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1221 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1222 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1223 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1224 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1238 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1238 | E1240 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | E2205 | BCBST | Edited code is a component of the listed code |
| E1238 | E2206 | BCBST | Edited code is a component of the listed code |
| E1238 | E2210 | BCBST | Edited code is a component of the listed code |
| E1238 | E2220 | BCBST | Edited code is a component of the listed code |
| E1238 | E2221 | BCBST | Edited code is a component of the listed code |
| E1238 | E2222 | BCBST | Edited code is a component of the listed code |
| E1238 | E2223 | BCBST | Edited code is a component of the listed code |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1238 | E2224 | BCBST | Edited code is a component of the listed code |
| E1238 | E2225 | BCBST | Edited code is a component of the listed code |
| E1238 | E2226 | BCBST | Edited code is a component of the listed code |
| E1238 | K0001 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | K0002 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | K0003 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | K0004 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | K0005 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | K0006 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | K0007 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | K0009 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | K0010 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | K0011 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | K0012 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | K0014 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1238 | K0015 | BCBST | Edited code is a component of the listed code |
| E1238 | K0017 | BCBST | Edited code is a component of the listed code |
| E1238 | K0018 | BCBST | Edited code is a component of the listed code |
| E1238 | K0019 | BCBST | Edited code is a component of the listed code |
| E1238 | K0042 | BCBST | Edited code is a component of the listed code |
| E1238 | K0043 | BCBST | Edited code is a component of the listed code |
| E1238 | K0044 | BCBST | Edited code is a component of the listed code |
| E1238 | K0045 | BCBST | Edited code is a component of the listed code |
| E1238 | K0046 | BCBST | Edited code is a component of the listed code |
| E1238 | K0047 | BCBST | Edited code is a component of the listed code |
| E1238 | K0050 | BCBST | Edited code is a component of the listed code |
| E1238 | K0052 | BCBST | Edited code is a component of the listed code |
| E1238 | K0069 | BCBST | Edited code is a component of the listed code |
| E1238 | K0070 | BCBST | Edited code is a component of the listed code |
| E1238 | K0071 | BCBST | Edited code is a component of the listed code |
| E1238 | K0072 | BCBST | Edited code is a component of the listed code |
| E1240 | E1240 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1240 | E1250 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1240 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1240 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1240 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1240 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1240 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1240 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1250 | E1250 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1250 | E1260 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1250 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1250 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1250 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1250 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1250 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1260 | E1260 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1260 | E1270 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1260 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1260 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1260 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1260 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1270 | E1270 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1270 | E1280 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1270 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1270 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1270 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1280 | E1280 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1280 | E1285 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1280 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1280 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1285 | E1285 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1285 | E1290 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1285 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1290 | E1290 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1290 | E1295 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| E1295 | E1295 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1296 | E1296 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1297 | E1297 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1298 | E1298 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1300 | E1300 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1300 | E1310 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| E1310 | E1310 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1353 | E1353 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1355 | E1355 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1372 | E1372 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1390 | RR A4608 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E1390 | RR A4615 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E1390 | RR A4616 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E1390 | RR A4617 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E1390 | RR A4619 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E1390 | RR A4620 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E1390 | RR A7525 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E1390 | RR E0424 RR | CMS | The edited oxygen system code is considered redundant to the listed oxygen system code. |
| E1390 | RR E0425 | CMS | The edited oxygen system code is considered redundant to the listed oxygen system code. |
| E1390 | RR E0439 RR | CMS | The edited oxygen system code is considered redundant to the listed oxygen system code. |
| E1390 | RR E0440 | CMS | The edited oxygen system code is considered redundant to the listed oxygen system code. |
| E1390 | RR E0441 | CMS | Service, supply or equipment for column 2 code is incompatible with column 1 code for service, supply or equipment |
| E1390 | RR E0442 | CMS | Service, supply or equipment for column 2 code is incompatible with column 1 code for service, supply or equipment |
| E1390 | RR E0455 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E1390 | RR E0455 NU | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E1390 | RR E0455 RR | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E1390 | RR E0555 NU | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E1390 | RR E0555 RR | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E1390 | RR E0555 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1390 RR | E0580 RR | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E1390 RR | E0580 UE | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E1390 RR | E0580 NU | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E1390 RR | E1353 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E1390 RR | E1355 | CMS | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| E1390 RR | E1390 RR | CMS | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1390 | E1390 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1405 | E1405 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1405 | E1406 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| E1406 | E1406 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1500 | E1500 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1510 | E1510 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1520 | E1520 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1530 | E1530 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1540 | E1540 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1550 | E1550 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1560 | E1560 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1570 | E1570 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1580 | E1580 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1590 | E1590 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1592 | E1592 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1592 | E1594 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| E1594 | E1594 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1600 | E1600 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1610 | E1610 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1615 | E1615 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1620 | E1620 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1625 | E1625 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1630 | E1630 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1635 | E1635 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1699 | E1699 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1700 | E1700 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1800 | E1800 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1800 | E1820 | BCBST | The edited code is considered an integral component of the listed code. |
| E1801 | E1801 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1801 | E1821 | BCBST | The edited code is considered an integral component of the listed code. |
| E1802 | E1802 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1805 | E1805 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1805 | E1820 | BCBST | The edited code is considered an integral component of the listed code. |
| E1806 | E1806 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1806 | E1821 | BCBST | The edited code is considered an integral component of the listed code. |
| E1810 | E1810 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1810 | E1820 | BCBST | The edited code is considered an integral component of the listed code. |
| E1811 | E1811 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1811 | E1821 | BCBST | The edited code is considered an integral component of the listed code. |
| E1815 | E1815 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1815 | E1820 | BCBST | The edited code is considered an integral component of the listed code. |
| E1816 | E1816 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1816 | E1821 | BCBST | The edited code is considered an integral component of the listed code. |
| E1818 | E1818 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1818 | E1821 | BCBST | The edited code is considered an integral component of the listed code. |
| E1820 | E1820 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| E1821 | E1821 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1825 | E1820 | BCBST | The edited code is considered an integral component of the listed code. |
| E1825 | E1825 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1830 | E1820 | BCBST | The edited code is considered an integral component of the listed code. |
| E1830 | E1830 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1840 | E1820 | BCBST | The edited code is considered an integral component of the listed code. |
| E1840 | E1840 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E1902 | E1902 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E2000 | E2000 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E2100 | E0607 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| E2100 | E2100 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| E2100 | E2101 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| E2101 | E0607 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| E2101 | E2101 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0008 | 99211 | NCCI | Misuse of column 2 code with column 1 code |
| G0008 | G0008 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| G0009 | 99211 | NCCI | Misuse of column 2 code with column 1 code |
| G0009 | G0009 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| G0010 | 99211 | NCCI | Misuse of column 2 code with column 1 code |
| G0010 | G0010 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| G0027 | 89321 | NCCI | HCPCS/CPT procedure code definition |
| G0101 | 57410 | NCCI | NCCI Mutually exclusive procedures |
| G0101 | 99201 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99202 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99203 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99211 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99212 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99213 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99217 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99218 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99221 | NCCI | NCCI Standards of medical / surgical practice |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| G0101 | 99231 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99232 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99238 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99239 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99241 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99242 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99251 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99252 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99281 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99282 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99291 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99292 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99295 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99296 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99298 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99300 | NCCI | Standards of medical/surgical practice |
| G0101 | 99304 | NCCI | Standards of medical/surgical practice |
| G0101 | 99305 | NCCI | Standards of medical/surgical practice |
| G0101 | 99306 | NCCI | Standards of medical/surgical practice |
| G0101 | 99307 | NCCI | Standards of medical/surgical practice |
| G0101 | 99308 | NCCI | Standards of medical/surgical practice |
| G0101 | 99309 | NCCI | Standards of medical/surgical practice |
| G0101 | 99310 | NCCI | Standards of medical/surgical practice |
| G0101 | 99318 | NCCI | Standards of medical/surgical practice |
| G0101 | 99324 | NCCI | Standards of medical/surgical practice |
| G0101 | 99325 | NCCI | Standards of medical/surgical practice |
| G0101 | 99326 | NCCI | Standards of medical/surgical practice |
| G0101 | 99327 | NCCI | Standards of medical/surgical practice |
| G0101 | 99328 | NCCI | Standards of medical/surgical practice |
| G0101 | 99334 | NCCI | Standards of medical/surgical practice |
| G0101 | 99335 | NCCI | Standards of medical/surgical practice |
| G0101 | 99336 | NCCI | Standards of medical/surgical practice |
| G0101 | 99337 | NCCI | Standards of medical/surgical practice |
| G0101 | 99341 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99342 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99347 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99348 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99354 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99355 | NCCI | NCCI Standards of medical / surgical practice |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0101 | 99356 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99357 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99360 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99431 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99432 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99433 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99435 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99436 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99440 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99455 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99456 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | 99477 | NCCI | Standard preparation/monitoring services for anesthesia |
| G0101 | G0101 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| G0101 | G0181 | NCCI | NCCI Standards of medical / surgical practice |
| G0101 | G0182 | NCCI | NCCI Standards of medical / surgical practice |
| G0103 | 84154 | NCCI | NCCI Mutually exclusive procedures |
| G0104 | 36000 | NCCI | NCCI Standards of medical / surgical practice |
| G0104 | 36410 | NCCI | NCCI HCPCS/CPT separate procedure definition |
| G0104 | 45300 | NCCI | NCCI Mutually exclusive procedures |
| G0104 | 45303 | NCCI | NCCI Mutually exclusive procedures |
| G0104 | 45307 | NCCI | NCCI Mutually exclusive procedures |
| G0104 | 45308 | NCCI | NCCI Mutually exclusive procedures |
| G0104 | 45355 | NCCI | NCCI Mutually exclusive procedures |
| G0104 | 46604 | NCCI | NCCI Mutually exclusive procedures |
| G0104 | 46608 | NCCI | NCCI Mutually exclusive procedures |
| G0104 | 46614 | NCCI | NCCI Mutually exclusive procedures |
| G0104 | 51701 | NCCI | Standards of medical/surgical practice |
| G0104 | 51702 | NCCI | Standards of medical/surgical practice |
| G0104 | 51703 | NCCI | Standards of medical/surgical practice |
| G0104 | 90760 | NCCI | Standards of medical/surgical practice |
| G0104 | 90765 | NCCI | Standards of medical/surgical practice |
| G0104 | 90772 | NCCI | Standards of medical/surgical practice |
| G0104 | 90774 | NCCI | Standards of medical/surgical practice |
| G0104 | 90775 | NCCI | Standards of medical/surgical practice |
| G0104 | 99291 | NCCI | NCCI Standards of medical / surgical practice |
| G0104 | 99292 | NCCI | NCCI Standards of medical / surgical practice |
| G0104 | 99295 | NCCI | NCCI Standards of medical / surgical practice |
| G0104 | 99296 | NCCI | NCCI Standards of medical / surgical practice |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0104 | 99298 | NCCI | NCCI Standards of medical / surgical practice |
| G0104 | 99300 | NCCI | Standards of medical/surgical practice |
| G0104 | 99304 | NCCI | Standards of medical/surgical practice |
| G0104 | 99305 | NCCI | Standards of medical/surgical practice |
| G0104 | 99306 | NCCI | Standards of medical/surgical practice |
| G0104 | 99307 | NCCI | Standards of medical/surgical practice |
| G0104 | 99308 | NCCI | Standards of medical/surgical practice |
| G0104 | 99309 | NCCI | Standards of medical/surgical practice |
| G0104 | 99310 | NCCI | Standards of medical/surgical practice |
| G0104 | 99318 | NCCI | Standards of medical/surgical practice |
| G0104 | 99324 | NCCI | Standards of medical/surgical practice |
| G0104 | 99325 | NCCI | Standards of medical/surgical practice |
| G0104 | 99326 | NCCI | Standards of medical/surgical practice |
| G0104 | 99327 | NCCI | Standards of medical/surgical practice |
| G0104 | 99328 | NCCI | Standards of medical/surgical practice |
| G0104 | 99334 | NCCI | Standards of medical/surgical practice |
| G0104 | 99335 | NCCI | Standards of medical/surgical practice |
| G0104 | 99336 | NCCI | Standards of medical/surgical practice |
| G0104 | 99337 | NCCI | Standards of medical/surgical practice |
| G0104 | 99360 | NCCI | NCCI Standards of medical / surgical practice |
| G0104 | 99431 | NCCI | NCCI Standards of medical / surgical practice |
| G0104 | 99432 | NCCI | NCCI Standards of medical / surgical practice |
| G0104 | 99433 | NCCI | NCCI Standards of medical / surgical practice |
| G0104 | 99435 | NCCI | NCCI Standards of medical / surgical practice |
| G0104 | 99436 | NCCI | NCCI Standards of medical / surgical practice |
| G0104 | 99440 | NCCI | NCCI Standards of medical / surgical practice |
| G0104 | 99455 | NCCI | NCCI Standards of medical / surgical practice |
| G0104 | 99456 | NCCI | NCCI Standards of medical / surgical practice |
| G0104 | 99477 | NCCI | Standard preparation/monitoring services for anesthesia |
| G0104 | G0104 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| G0104 | G0120 | NCCI | NCCI Mutually exclusive procedures |
| G0104 | G0181 | NCCI | NCCI Standards of medical / surgical practice |
| G0104 | G0182 | NCCI | NCCI Standards of medical / surgical practice |
| G0105 | 36000 | NCCI | NCCI Standards of medical / surgical practice |
| G0105 | 36410 | NCCI | NCCI Standards of medical / surgical practice |
| G0105 | 45300 | NCCI | NCCI Mutually exclusive procedures |
| G0105 | 45303 | NCCI | NCCI Mutually exclusive procedures |
| G0105 | 45305 | NCCI | NCCI Mutually exclusive procedures |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| G0105 | 45307 | NCCI | NCCI Mutually exclusive procedures |
| G0105 | 45308 | NCCI | NCCI Mutually exclusive procedures |
| G0105 | 45309 | NCCI | NCCI Mutually exclusive procedures |
| G0105 | 45315 | NCCI | NCCI Mutually exclusive procedures |
| G0105 | 45317 | NCCI | NCCI Mutually exclusive procedures |
| G0105 | 45320 | NCCI | NCCI Mutually exclusive procedures |
| G0105 | 45321 | NCCI | NCCI Mutually exclusive procedures |
| G0105 | 45327 | NCCI | NCCI Mutually exclusive procedures |
| G0105 | 45330 | BCBST | NCCI Mutually exclusive procedures |
| G0105 | 45331 | NCCI | NCCI Mutually exclusive procedures |
| G0105 | 45332 | NCCI | NCCI Mutually exclusive procedures |
| G0105 | 45333 | NCCI | NCCI Mutually exclusive procedures |
| G0105 | 45334 | NCCI | NCCI Mutually exclusive procedures |
| G0105 | 45337 | NCCI | NCCI Mutually exclusive procedures |
| G0105 | 45338 | NCCI | NCCI Mutually exclusive procedures |
| G0105 | 45339 | NCCI | NCCI Mutually exclusive procedures |
| G0105 | 45341 | NCCI | NCCI Mutually exclusive procedures |
| G0105 | 45342 | BCBST | NCCI Mutually exclusive procedures |
| G0105 | 45345 | NCCI | NCCI Mutually exclusive procedures |
| G0105 | 45355 | BCBST | NCCI Mutually exclusive procedures |
| G0105 | 51701 | NCCI | Standards of medical/surgical practice |
| G0105 | 51702 | NCCI | Standards of medical/surgical practice |
| G0105 | 51703 | NCCI | Standards of medical/surgical practice |
| G0105 | 90760 | NCCI | Standards of medical/surgical practice |
| G0105 | 90765 | NCCI | Standards of medical/surgical practice |
| G0105 | 90772 | NCCI | Standards of medical/surgical practice |
| G0105 | 90774 | NCCI | Standards of medical/surgical practice |
| G0105 | 90775 | NCCI | Standards of medical/surgical practice |
| G0105 | 99291 | NCCI | NCCI Standards of medical / surgical practice |
| G0105 | 99291 | NCCI | NCCI Refer to Specific Guidelines |
| G0105 | 99292 | NCCI | NCCI Standards of medical / surgical practice |
| G0105 | 99292 | NCCI | NCCI Refer to Specific Guidelines |
| G0105 | 99295 | NCCI | NCCI Refer to Specific Guidelines |
| G0105 | 99295 | NCCI | NCCI Standards of medical / surgical practice |
| G0105 | 99296 | NCCI | NCCI Refer to Specific Guidelines |
| G0105 | 99296 | NCCI | NCCI Standards of medical / surgical practice |
| G0105 | 99298 | NCCI | NCCI Refer to Specific Guidelines |
| G0105 | 99298 | NCCI | NCCI Standards of medical / surgical practice |
| G0105 | 99300 | NCCI | Standards of medical/surgical practice |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0105 | 99304 | NCCI | Standards of medical/surgical practice |
| G0105 | 99305 | NCCI | Standards of medical/surgical practice |
| G0105 | 99306 | NCCI | Standards of medical/surgical practice |
| G0105 | 99307 | NCCI | Standards of medical/surgical practice |
| G0105 | 99308 | NCCI | Standards of medical/surgical practice |
| G0105 | 99309 | NCCI | Standards of medical/surgical practice |
| G0105 | 99310 | NCCI | Standards of medical/surgical practice |
| G0105 | 99318 | NCCI | Standards of medical/surgical practice |
| G0105 | 99324 | NCCI | Standards of medical/surgical practice |
| G0105 | 99325 | NCCI | Standards of medical/surgical practice |
| G0105 | 99326 | NCCI | Standards of medical/surgical practice |
| G0105 | 99327 | NCCI | Standards of medical/surgical practice |
| G0105 | 99328 | NCCI | Standards of medical/surgical practice |
| G0105 | 99334 | NCCI | Standards of medical/surgical practice |
| G0105 | 99335 | NCCI | Standards of medical/surgical practice |
| G0105 | 99336 | NCCI | Standards of medical/surgical practice |
| G0105 | 99337 | NCCI | Standards of medical/surgical practice |
| G0105 | 99360 | NCCI | NCCI Refer to Specific Guidelines |
| G0105 | 99360 | NCCI | NCCI Standards of medical / surgical practice |
| G0105 | 99431 | NCCI | NCCI Refer to Specific Guidelines |
| G0105 | 99431 | NCCI | NCCI Standards of medical / surgical practice |
| G0105 | 99432 | NCCI | NCCI Refer to Specific Guidelines |
| G0105 | 99432 | NCCI | NCCI Standards of medical / surgical practice |
| G0105 | 99433 | NCCI | NCCI Refer to Specific Guidelines |
| G0105 | 99433 | NCCI | NCCI Standards of medical / surgical practice |
| G0105 | 99435 | NCCI | NCCI Refer to Specific Guidelines |
| G0105 | 99435 | NCCI | NCCI Standards of medical / surgical practice |
| G0105 | 99436 | NCCI | NCCI Refer to Specific Guidelines |
| G0105 | 99436 | NCCI | NCCI Standards of medical / surgical practice |
| G0105 | 99440 | NCCI | NCCI Refer to Specific Guidelines |
| G0105 | 99440 | NCCI | NCCI Standards of medical / surgical practice |
| G0105 | 99455 | NCCI | NCCI Refer to Specific Guidelines |
| G0105 | 99455 | NCCI | NCCI Standards of medical / surgical practice |
| G0105 | 99456 | NCCI | NCCI Refer to Specific Guidelines |
| G0105 | 99456 | NCCI | NCCI Standards of medical / surgical practice |
| G0105 | 99477 | NCCI | Standard preparation/monitoring services for anesthesia |
| G0105 | G0105 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| G0105 | G0181 | BCBST | NCCI Standards of medical / surgical practice |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0105 | G0182 | BCBST | NCCI Standards of medical / surgical practice |
| G0106 | 74010 | NCCI | NCCI Standards of medical / surgical practice |
| G0106 | 74270 | NCCI | NCCI Mutually exclusive procedures |
| G0106 | 74280 | NCCI | NCCI Mutually exclusive procedures |
| G0106 | 99291 | NCCI | NCCI Standards of medical / surgical practice |
| G0106 | 99292 | NCCI | NCCI Standards of medical / surgical practice |
| G0106 | 99295 | NCCI | NCCI Standards of medical / surgical practice |
| G0106 | 99296 | NCCI | NCCI Standards of medical / surgical practice |
| G0106 | 99298 | NCCI | NCCI Standards of medical / surgical practice |
| G0106 | 99300 | NCCI | Standards of medical/surgical practice |
| G0106 | 99304 | NCCI | Standards of medical/surgical practice |
| G0106 | 99305 | NCCI | Standards of medical/surgical practice |
| G0106 | 99306 | NCCI | Standards of medical/surgical practice |
| G0106 | 99307 | NCCI | Standards of medical/surgical practice |
| G0106 | 99308 | NCCI | Standards of medical/surgical practice |
| G0106 | 99309 | NCCI | Standards of medical/surgical practice |
| G0106 | 99310 | NCCI | Standards of medical/surgical practice |
| G0106 | 99318 | NCCI | Standards of medical/surgical practice |
| G0106 | 99324 | NCCI | Standards of medical/surgical practice |
| G0106 | 99325 | NCCI | Standards of medical/surgical practice |
| G0106 | 99326 | NCCI | Standards of medical/surgical practice |
| G0106 | 99327 | NCCI | Standards of medical/surgical practice |
| G0106 | 99328 | NCCI | Standards of medical/surgical practice |
| G0106 | 99334 | NCCI | Standards of medical/surgical practice |
| G0106 | 99335 | NCCI | Standards of medical/surgical practice |
| G0106 | 99336 | NCCI | Standards of medical/surgical practice |
| G0106 | 99337 | NCCI | Standards of medical/surgical practice |
| G0106 | 99360 | NCCI | NCCI Standards of medical / surgical practice |
| G0106 | 99431 | NCCI | NCCI Standards of medical / surgical practice |
| G0106 | 99432 | NCCI | NCCI Standards of medical / surgical practice |
| G0106 | 99433 | NCCI | NCCI Standards of medical / surgical practice |
| G0106 | 99435 | NCCI | NCCI Standards of medical / surgical practice |
| G0106 | 99436 | NCCI | NCCI Standards of medical / surgical practice |
| G0106 | 99440 | NCCI | NCCI Standards of medical / surgical practice |
| G0106 | 99455 | NCCI | NCCI Standards of medical / surgical practice |
| G0106 | 99456 | NCCI | NCCI Standards of medical / surgical practice |
| G0106 | 99477 | NCCI | Standard preparation/monitoring services for anesthesia |
| G0106 | G0106 | BCBST | Code redundant to self/should not be reported more than once due to standard description |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0106 | G0181 | NCCI | NCCI Standards of medical / surgical practice |
| G0106 | G0182 | NCCI | NCCI Standards of medical / surgical practice |
| G0108 | 97802 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0108 | 97803 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0108 | 97804 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0108 | G0270 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0108 | G0271 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0109 | 97802 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0109 | 97803 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0109 | 97804 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0109 | G0270 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0109 | G0271 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0117 | 92020 | BCBST | The edited code is considered an integral component of the listed code. |
| G0117 | G0117 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0117 | G0118 | BCBST | NCCI Most extensive procedures / The edited code is considered an integral component of the listed code. |
| G0118 | 92020 | BCBST | The edited code is considered an integral component of the listed code. |
| G0118 | G0118 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0120 | 74270 | NCCI | NCCI Mutually exclusive procedures |
| G0120 | 74280 | NCCI | NCCI Mutually exclusive procedures |
| G0120 | 99291 | NCCI | NCCI Standards of medical / surgical practice |
| G0120 | 99292 | NCCI | NCCI Standards of medical / surgical practice |
| G0120 | 99295 | NCCI | NCCI Standards of medical / surgical practice |
| G0120 | 99296 | NCCI | NCCI Standards of medical / surgical practice |
| G0120 | 99298 | NCCI | NCCI Standards of medical / surgical practice |
| G0120 | 99300 | NCCI | Standards of medical/surgical practice |
| G0120 | 99304 | NCCI | Standards of medical/surgical practice |
| G0120 | 99305 | NCCI | Standards of medical/surgical practice |
| G0120 | 99306 | NCCI | Standards of medical/surgical practice |
| G0120 | 99307 | NCCI | Standards of medical/surgical practice |
| G0120 | 99308 | NCCI | Standards of medical/surgical practice |
| G0120 | 99309 | NCCI | Standards of medical/surgical practice |
| G0120 | 99310 | NCCI | Standards of medical/surgical practice |
| G0120 | 99318 | NCCI | Standards of medical/surgical practice |
| G0120 | 99324 | NCCI | Standards of medical/surgical practice |
| G0120 | 99325 | NCCI | Standards of medical/surgical practice |
| G0120 | 99326 | NCCI | Standards of medical/surgical practice |
| G0120 | 99327 | NCCI | Standards of medical/surgical practice |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0120 | 99328 | NCCI | Standards of medical/surgical practice |
| G0120 | 99334 | NCCI | Standards of medical/surgical practice |
| G0120 | 99335 | NCCI | Standards of medical/surgical practice |
| G0120 | 99336 | NCCI | Standards of medical/surgical practice |
| G0120 | 99337 | NCCI | Standards of medical/surgical practice |
| G0120 | 99360 | NCCI | NCCI Standards of medical / surgical practice |
| G0120 | 99431 | NCCI | NCCI Standards of medical / surgical practice |
| G0120 | 99432 | NCCI | NCCI Standards of medical / surgical practice |
| G0120 | 99433 | NCCI | NCCI Standards of medical / surgical practice |
| G0120 | 99435 | NCCI | NCCI Standards of medical / surgical practice |
| G0120 | 99436 | NCCI | NCCI Standards of medical / surgical practice |
| G0120 | 99440 | NCCI | NCCI Standards of medical / surgical practice |
| G0120 | 99455 | NCCI | NCCI Standards of medical / surgical practice |
| G0120 | 99456 | NCCI | NCCI Standards of medical / surgical practice |
| G0120 | 99477 | NCCI | Standard preparation/monitoring services for anesthesia |
| G0120 | G0105 | NCCI | NCCI Mutually exclusive procedures |
| G0120 | G0106 | NCCI | NCCI Mutually exclusive procedures |
| G0120 | G0120 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| G0120 | G0121 | NCCI | NCCI Mutually exclusive procedures |
| G0120 | G0181 | NCCI | NCCI Standards of medical / surgical practice |
| G0120 | G0182 | NCCI | NCCI Standards of medical / surgical practice |
| G0121 | 36000 | NCCI | NCCI Standards of medical / surgical practice |
| G0121 | 36410 | NCCI | NCCI Standards of medical / surgical practice |
| G0121 | 45300 | NCCI | NCCI Mutually exclusive procedures |
| G0121 | 45303 | NCCI | NCCI Mutually exclusive procedures |
| G0121 | 45305 | NCCI | NCCI Mutually exclusive procedures |
| G0121 | 45307 | NCCI | NCCI Mutually exclusive procedures |
| G0121 | 45308 | NCCI | NCCI Mutually exclusive procedures |
| G0121 | 45309 | NCCI | NCCI Mutually exclusive procedures |
| G0121 | 45315 | NCCI | NCCI Mutually exclusive procedures |
| G0121 | 45317 | NCCI | NCCI Mutually exclusive procedures |
| G0121 | 45320 | NCCI | NCCI Mutually exclusive procedures |
| G0121 | 45321 | NCCI | NCCI Mutually exclusive procedures |
| G0121 | 45327 | NCCI | NCCI Mutually exclusive procedures |
| G0121 | 45331 | NCCI | NCCI Mutually exclusive procedures |
| G0121 | 45332 | NCCI | NCCI Mutually exclusive procedures |
| G0121 | 45333 | NCCI | NCCI Mutually exclusive procedures |
| G0121 | 45334 | NCCI | NCCI Mutually exclusive procedures |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| G0121 | 45337 | NCCI | NCCI Mutually exclusive procedures |
| G0121 | 45338 | NCCI | NCCI Mutually exclusive procedures |
| G0121 | 45339 | NCCI | NCCI Mutually exclusive procedures |
| G0121 | 45341 | NCCI | NCCI Mutually exclusive procedures |
| G0121 | 45342 | BCBST | NCCI Mutually exclusive procedures |
| G0121 | 45345 | NCCI | NCCI Mutually exclusive procedures |
| G0121 | 51701 | NCCI | Standards of medical/surgical practice |
| G0121 | 51702 | NCCI | Standards of medical/surgical practice |
| G0121 | 51703 | NCCI | Standards of medical/surgical practice |
| G0121 | 90760 | NCCI | Standards of medical/surgical practice |
| G0121 | 90765 | NCCI | Standards of medical/surgical practice |
| G0121 | 90772 | NCCI | Standards of medical/surgical practice |
| G0121 | 90774 | NCCI | Standards of medical/surgical practice |
| G0121 | 90775 | NCCI | Standards of medical/surgical practice |
| G0121 | 99291 | NCCI | NCCI Refer to Specific Guidelines |
| G0121 | 99291 | NCCI | NCCI Standards of medical / surgical practice |
| G0121 | 99292 | NCCI | NCCI Refer to Specific Guidelines |
| G0121 | 99292 | NCCI | NCCI Standards of medical / surgical practice |
| G0121 | 99295 | NCCI | NCCI Standards of medical / surgical practice |
| G0121 | 99295 | NCCI | NCCI Refer to Specific Guidelines |
| G0121 | 99296 | NCCI | NCCI Refer to Specific Guidelines |
| G0121 | 99296 | NCCI | NCCI Standards of medical / surgical practice |
| G0121 | 99298 | NCCI | NCCI Refer to Specific Guidelines |
| G0121 | 99298 | NCCI | NCCI Standards of medical / surgical practice |
| G0121 | 99300 | NCCI | Standards of medical/surgical practice |
| G0121 | 99304 | NCCI | Standards of medical/surgical practice |
| G0121 | 99305 | NCCI | Standards of medical/surgical practice |
| G0121 | 99306 | NCCI | Standards of medical/surgical practice |
| G0121 | 99307 | NCCI | Standards of medical/surgical practice |
| G0121 | 99308 | NCCI | Standards of medical/surgical practice |
| G0121 | 99309 | NCCI | Standards of medical/surgical practice |
| G0121 | 99310 | NCCI | Standards of medical/surgical practice |
| G0121 | 99318 | NCCI | Standards of medical/surgical practice |
| G0121 | 99324 | NCCI | Standards of medical/surgical practice |
| G0121 | 99325 | NCCI | Standards of medical/surgical practice |
| G0121 | 99326 | NCCI | Standards of medical/surgical practice |
| G0121 | 99327 | NCCI | Standards of medical/surgical practice |
| G0121 | 99328 | NCCI | Standards of medical/surgical practice |
| G0121 | 99334 | NCCI | Standards of medical/surgical practice |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0121 | 99335 | NCCI | Standards of medical/surgical practice |
| G0121 | 99336 | NCCI | Standards of medical/surgical practice |
| G0121 | 99337 | NCCI | Standards of medical/surgical practice |
| G0121 | 99360 | NCCI | NCCI Refer to Specific Guidelines |
| G0121 | 99360 | NCCI | NCCI Standards of medical / surgical practice |
| G0121 | 99431 | NCCI | NCCI Standards of medical / surgical practice |
| G0121 | 99431 | NCCI | NCCI Refer to Specific Guidelines |
| G0121 | 99432 | NCCI | NCCI Refer to Specific Guidelines |
| G0121 | 99432 | NCCI | NCCI Standards of medical / surgical practice |
| G0121 | 99433 | NCCI | NCCI Standards of medical / surgical practice |
| G0121 | 99433 | NCCI | NCCI Refer to Specific Guidelines |
| G0121 | 99435 | NCCI | NCCI Standards of medical / surgical practice |
| G0121 | 99435 | NCCI | NCCI Refer to Specific Guidelines |
| G0121 | 99440 | NCCI | NCCI Standards of medical / surgical practice |
| G0121 | 99440 | NCCI | NCCI Refer to Specific Guidelines |
| G0121 | 99455 | NCCI | NCCI Standards of medical / surgical practice |
| G0121 | 99455 | NCCI | NCCI Refer to Specific Guidelines |
| G0121 | 99456 | NCCI | NCCI Standards of medical / surgical practice |
| G0121 | 99456 | NCCI | NCCI Refer to Specific Guidelines |
| G0121 | 99477 | NCCI | Standard preparation/monitoring services for anesthesia |
| G0121 | G0121 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| G0122 | G0122 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| G0123 | G0123 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| G0123 | P3000 | NCCI | NCCI Standards of medical / surgical practice |
| G0124 | 88142 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0124 | 88142 | NCCI | NCCI Refer to Specific Guidelines |
| G0124 | 88143 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0124 | 88147 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0124 | 88148 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0124 | 88150 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0124 | 88152 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0124 | 88153 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0124 | 88154 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0124 | 88164 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0124 | 88165 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0124 | 88166 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0124 | 88167 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |

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BlueCross BlueShield of Tennessee-Coding Bundling Rules

Source: PNC-CARR

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0124 | 88174 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0124 | 88175 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0124 | G0124 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| G0124 | G0141 | NCCI | Standards of medical/surgical practice |
| G0124 | G0147 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0124 | G0148 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0124 | P3000 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0124 | P3001 | NCCI | NCCI Standards of medical / surgical practice |
| G0127 | 51701 | NCCI | Standards of medical/surgical practice |
| G0127 | 51702 | NCCI | Standards of medical/surgical practice |
| G0127 | 51703 | NCCI | Standards of medical/surgical practice |
| G0127 | 97602 | NCCI | Standards of medical/surgical practice |
| G0127 | 97605 | NCCI | Standards of medical/surgical practice |
| G0127 | 97606 | NCCI | Standards of medical/surgical practice |
| G0127 | 99304 | NCCI | Mutually exclusive procedure |
| G0127 | 99305 | NCCI | Mutually exclusive procedure |
| G0127 | 99306 | NCCI | Mutually exclusive procedure |
| G0127 | 99307 | NCCI | Mutually exclusive procedure |
| G0127 | 99308 | NCCI | Mutually exclusive procedure |
| G0127 | 99309 | NCCI | Mutually exclusive procedure |
| G0127 | 99310 | NCCI | Mutually exclusive procedure |
| G0127 | 99318 | NCCI | Mutually exclusive procedure |
| G0127 | 99324 | NCCI | Mutually exclusive procedure |
| G0127 | 99325 | NCCI | Mutually exclusive procedure |
| G0127 | 99326 | NCCI | Mutually exclusive procedure |
| G0127 | 99327 | NCCI | Mutually exclusive procedure |
| G0127 | 99328 | NCCI | Mutually exclusive procedure |
| G0127 | 99334 | NCCI | Mutually exclusive procedure |
| G0127 | 99335 | NCCI | Mutually exclusive procedure |
| G0127 | 99336 | NCCI | Mutually exclusive procedure |
| G0127 | 99337 | NCCI | Mutually exclusive procedure |
| G0127 | G0127 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| G0129 | 97001 | NCCI | NCCI Standards of medical / surgical practice |
| G0129 | 97002 | NCCI | NCCI Standards of medical / surgical practice |
| G0129 | 97003 | NCCI | NCCI Standards of medical / surgical practice |
| G0129 | 97004 | NCCI | NCCI Standards of medical / surgical practice |
| G0129 | 97150 | NCCI | NCCI Standards of medical / surgical practice |
| G0129 | 97530 | NCCI | NCCI Standards of medical / surgical practice |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0129 | 97532 | NCCI | NCCI Standards of medical / surgical practice |
| G0129 | 97533 | NCCI | NCCI Standards of medical / surgical practice |
| G0129 | 97535 | NCCI | NCCI Standards of medical / surgical practice |
| G0129 | 97537 | NCCI | NCCI Standards of medical / surgical practice |
| G0129 | 97542 | NCCI | NCCI Standards of medical / surgical practice |
| G0129 | 97545 | NCCI | NCCI Standards of medical / surgical practice |
| G0130 | 76977 | NCCI | NCCI Mutually exclusive procedures |
| G0130 | 77080 | NCCI | Mutually exclusive |
| G0130 | 78350 | NCCI | Mutually Exclusive Procedure |
| G0130 | G0130 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| G0141 | 88142 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0141 | 88143 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0141 | 88147 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0141 | 88148 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0141 | 88148 | NCCI | NCCI Refer to Specific Guidelines |
| G0141 | 88150 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0141 | 88152 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0141 | 88153 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0141 | 88154 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0141 | 88164 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0141 | 88165 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0141 | 88166 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0141 | 88167 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0141 | 88174 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0141 | 88175 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0141 | G0123 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0141 | G0141 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| G0141 | G0143 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0141 | G0144 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0141 | P3000 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0143 | G0143 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| G0144 | 88142 | Reversed NCCI | Standards of Medical/Surgical practice |
| G0144 | 88143 | Reversed NCCI | Standards of Medical/Surgical practice |
| G0144 | G0144 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| G0145 | 88142 | Reversed NCCI | Standards of Medical/Surgical practice |
| G0145 | 88143 | Reversed NCCI | Standards of Medical/Surgical practice |

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BlueCross BlueShield of Tennessee-Coding Bundling Rules

Source: PNC-CARR

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0145 | G0145 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| G0145 | G0147 | NCCI | NCCI Standards of medical / surgical practice |
| G0145 | G0148 | NCCI | NCCI Standards of medical / surgical practice |
| G0147 | G0147 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| G0148 | G0147 | NCCI | NCCI Standards of medical / surgical practice |
| G0148 | G0148 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| G0151 | 97003 | NCCI | NCCI Standards of medical / surgical practice |
| G0151 | 97004 | NCCI | NCCI Standards of medical / surgical practice |
| G0151 | 97150 | NCCI | NCCI Standards of medical / surgical practice |
| G0151 | 97532 | NCCI | NCCI Standards of medical / surgical practice |
| G0151 | 97533 | NCCI | NCCI Standards of medical / surgical practice |
| G0151 | 97537 | NCCI | NCCI Standards of medical / surgical practice |
| G0151 | 97760 | NCCI | Standards of medical/surgical practice |
| G0151 | 97761 | NCCI | Standards of medical/surgical practice |
| G0151 | 97762 | NCCI | Standards of medical/surgical practice |
| G0151 | G0281 | NCCI | Standards of medical / surgical practice |
| G0151 | G0283 | NCCI | Standards of medical / surgical practice |
| G0152 | 97001 | NCCI | NCCI Standards of medical / surgical practice |
| G0152 | 97002 | NCCI | NCCI Standards of medical / surgical practice |
| G0152 | 97003 | NCCI | NCCI Standards of medical / surgical practice |
| G0152 | 97150 | NCCI | NCCI Standards of medical / surgical practice |
| G0152 | 97530 | NCCI | NCCI Standards of medical / surgical practice |
| G0152 | 97533 | NCCI | NCCI Standards of medical / surgical practice |
| G0152 | 97542 | NCCI | NCCI Standards of medical / surgical practice |
| G0152 | 97545 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92506 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92507 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92508 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92526 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92552 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92553 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92555 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92556 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92557 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92561 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92562 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92563 | NCCI | NCCI Standards of medical / surgical practice |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| G0153 | 92564 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92565 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92567 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92568 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92569 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92571 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92572 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92575 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92576 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92577 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92579 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92582 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92583 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92584 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92585 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92587 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92588 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92596 | NCCI | NCCI Standards of medical / surgical practice |
| G0153 | 92620 | NCCI | Standards of Medical/Surgical Practice |
| G0153 | 92621 | NCCI | Standards of Medical/Surgical Practice |
| G0153 | 92625 | NCCI | Inappropriate Interpretation of CPT Code Definition |
| G0154 | 36430 | NCCI | NCCI Standards of medical / surgical practice |
| G0154 | 90760 | NCCI | Standards of medical/surgical practice |
| G0154 | 90765 | NCCI | Standards of medical/surgical practice |
| G0154 | G0008 | NCCI | NCCI Standards of medical / surgical practice |
| G0154 | G0009 | NCCI | NCCI Standards of medical / surgical practice |
| G0154 | G0010 | NCCI | NCCI Standards of medical / surgical practice |
| G0154 | G0128 | NCCI | NCCI Mutually exclusive procedures |
| G0154 | P9612 | NCCI | NCCI Standards of medical / surgical practice |
| G0154 | P9615 | NCCI | NCCI Standards of medical / surgical practice |
| G0154 | Q0081 | Retained NCCI | NCCI Standards of medical / surgical practice |
| G0154 | Q0083 | Retained NCCI | NCCI Standards of medical / surgical practice |
| G0154 | Q0084 | Retained NCCI | NCCI Standards of medical / surgical practice |
| G0154 | Q0085 | Retained NCCI | NCCI Standards of medical / surgical practice |
| G0155 | 97537 | NCCI | NCCI Standards of medical / surgical practice |
| G0166 | 92971 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0166 | 93000 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0166 | 93005 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0166 | 93010 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| G0166 | 93040 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0166 | 93041 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0166 | 93042 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0166 | 93701 | NCCI | NCCI Standards of medical / surgical practice |
| G0166 | 93720 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0166 | 93721 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0166 | 93722 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0166 | 93922 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0166 | 93923 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0166 | 93924 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0166 | 93965 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0166 | 97016 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0166 | 99211 | NCCI | Standards of medical / surgical practice |
| G0168 | 51701 | NCCI | Standards of medical/surgical practice |
| G0168 | 51702 | NCCI | Standards of medical/surgical practice |
| G0168 | 51703 | NCCI | Standards of medical/surgical practice |
| G0168 | 90760 | NCCI | Standards of medical/surgical practice |
| G0168 | 90765 | NCCI | Standards of medical/surgical practice |
| G0168 | 90772 | NCCI | Standards of medical/surgical practice |
| G0168 | 90774 | NCCI | Standards of medical/surgical practice |
| G0168 | 90775 | NCCI | Standards of medical/surgical practice |
| G0173 | 11920 | NCCI | Standards of medical/surgical practice |
| G0173 | 11921 | NCCI | Standards of medical/surgical practice |
| G0173 | 16000 | NCCI | Standards of medical/surgical practice |
| G0173 | 16020 | NCCI | Standards of medical/surgical practice |
| G0173 | 16025 | NCCI | Standards of medical/surgical practice |
| G0173 | 16030 | NCCI | Standards of medical/surgical practice |
| G0173 | 20660 | NCCI | NCCI HCPCS/CPT separate procedure definition |
| G0173 | 20661 | NCCI | NCCI Standards of medical / surgical practice |
| G0173 | 20693 | NCCI | NCCI Standards of medical / surgical practice |
| G0173 | 20694 | NCCI | NCCI Standards of medical / surgical practice |
| G0173 | 36000 | NCCI | Standards of medical/surgical practice |
| G0173 | 36410 | NCCI | Standards of medical/surgical practice |
| G0173 | 36425 | NCCI | Standards of medical/surgical practice |
| G0173 | 51701 | NCCI | Standards of medical/surgical practice |
| G0173 | 51702 | NCCI | Standards of medical/surgical practice |
| G0173 | 51703 | NCCI | Standards of medical/surgical practice |
| G0173 | 61304 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61305 | NCCI | NCCI Mutually exclusive procedures |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| G0173 | 61312 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61313 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61314 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61315 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61320 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61321 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61330 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61332 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61333 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61440 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61450 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61458 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61460 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61470 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61480 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61490 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61500 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61501 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61510 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61512 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61514 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61516 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61518 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61519 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61520 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61521 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61522 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61524 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61526 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61530 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61563 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61564 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61720 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61735 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61790 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61791 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61793 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 61793 | NCCI | Mutually exclusive procedures |
| G0173 | 61795 | NCCI | NCCI Standards of medical / surgical practice |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| G0173 | 69990 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0173 | 77321 | NCCI | Standards of medical/surgical practice |
| G0173 | 77326 | NCCI | NCCI Standards of medical / surgical practice |
| G0173 | 77327 | NCCI | NCCI Standards of medical / surgical practice |
| G0173 | 77328 | NCCI | NCCI Standards of medical / surgical practice |
| G0173 | 77336 | NCCI | Standards of medical/surgical practice |
| G0173 | 77371 | NCCI | Mutually exclusive |
| G0173 | 77372 | NCCI | Mutually exclusive |
| G0173 | 77373 | NCCI | Mutually exclusive |
| G0173 | 77418 | NCCI | Misuse of column 2 code with column 1 code |
| G0173 | 77427 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 77431 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 77470 | NCCI | NCCI Mutually exclusive procedures |
| G0173 | 90804 | NCCI | Standards of medical/surgical practice |
| G0173 | 90805 | NCCI | Standards of medical/surgical practice |
| G0173 | 90806 | NCCI | Standards of medical/surgical practice |
| G0173 | 90807 | NCCI | Standards of medical/surgical practice |
| G0173 | 90808 | NCCI | Standards of medical/surgical practice |
| G0173 | 90809 | NCCI | Standards of medical/surgical practice |
| G0173 | 90810 | NCCI | Standards of medical/surgical practice |
| G0173 | 90811 | NCCI | Standards of medical/surgical practice |
| G0173 | 90812 | NCCI | Standards of medical/surgical practice |
| G0173 | 90813 | NCCI | Standards of medical/surgical practice |
| G0173 | 90814 | NCCI | Standards of medical/surgical practice |
| G0173 | 90815 | NCCI | Standards of medical/surgical practice |
| G0173 | 90816 | NCCI | Standards of medical/surgical practice |
| G0173 | 90817 | NCCI | Standards of medical/surgical practice |
| G0173 | 90818 | NCCI | Standards of medical/surgical practice |
| G0173 | 90819 | NCCI | Standards of medical/surgical practice |
| G0173 | 90821 | NCCI | Standards of medical/surgical practice |
| G0173 | 90822 | NCCI | Standards of medical/surgical practice |
| G0173 | 90846 | NCCI | Standards of medical/surgical practice |
| G0173 | 90847 | NCCI | Standards of medical/surgical practice |
| G0173 | 90862 | NCCI | Standards of medical/surgical practice |
| G0173 | 97802 | NCCI | Standards of medical/surgical practice |
| G0173 | 97803 | NCCI | Standards of medical/surgical practice |
| G0173 | 97804 | NCCI | Standards of medical/surgical practice |
| G0173 | 99185 | NCCI | Standards of medical/surgical practice |
| G0173 | 99201 | NCCI | Standards of medical/surgical practice |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0173 | 99202 | NCCI | Standards of medical/surgical practice |
| G0173 | 99203 | NCCI | Standards of medical/surgical practice |
| G0173 | 99204 | NCCI | Standards of medical/surgical practice |
| G0173 | 99205 | NCCI | Standards of medical/surgical practice |
| G0173 | 99211 | NCCI | Standards of medical/surgical practice |
| G0173 | 99212 | NCCI | Standards of medical/surgical practice |
| G0173 | 99213 | NCCI | Standards of medical/surgical practice |
| G0173 | 99214 | NCCI | Standards of medical/surgical practice |
| G0173 | 99215 | NCCI | Standards of medical/surgical practice |
| G0173 | 99217 | NCCI | Standards of medical/surgical practice |
| G0173 | 99218 | NCCI | Standards of medical/surgical practice |
| G0173 | 99219 | NCCI | Standards of medical/surgical practice |
| G0173 | 99220 | NCCI | Standards of medical/surgical practice |
| G0173 | 99221 | NCCI | Standards of medical/surgical practice |
| G0173 | 99222 | NCCI | Standards of medical/surgical practice |
| G0173 | 99223 | NCCI | Standards of medical/surgical practice |
| G0173 | 99231 | NCCI | Standards of medical/surgical practice |
| G0173 | 99232 | NCCI | Standards of medical/surgical practice |
| G0173 | 99233 | NCCI | Standards of medical/surgical practice |
| G0173 | 99234 | NCCI | Standards of medical/surgical practice |
| G0173 | 99235 | NCCI | Standards of medical/surgical practice |
| G0173 | 99236 | NCCI | Standards of medical/surgical practice |
| G0173 | 99238 | NCCI | Standards of medical/surgical practice |
| G0173 | 99239 | NCCI | Standards of medical/surgical practice |
| G0173 | 99281 | NCCI | Standards of medical/surgical practice |
| G0173 | 99282 | NCCI | Standards of medical/surgical practice |
| G0173 | 99283 | NCCI | Standards of medical/surgical practice |
| G0173 | 99284 | NCCI | Standards of medical/surgical practice |
| G0173 | 99285 | NCCI | Standards of medical/surgical practice |
| G0173 | 99289 | NCCI | Standards of medical/surgical practice |
| G0173 | 99290 | NCCI | Standards of medical/surgical practice |
| G0173 | 99291 | NCCI | Standards of medical/surgical practice |
| G0173 | 99292 | NCCI | Standards of medical/surgical practice |
| G0173 | 99293 | NCCI | Standards of medical/surgical practice |
| G0173 | 99294 | NCCI | Standards of medical/surgical practice |
| G0173 | 99295 | NCCI | Standards of medical/surgical practice |
| G0173 | 99296 | NCCI | Standards of medical/surgical practice |
| G0173 | 99298 | NCCI | Standards of medical/surgical practice |
| G0173 | 99299 | NCCI | Standards of medical/surgical practice |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| G0173 | 99300 | NCCI | Standards of medical/surgical practice |
| G0173 | 99304 | NCCI | Standards of medical/surgical practice |
| G0173 | 99305 | NCCI | Standards of medical/surgical practice |
| G0173 | 99306 | NCCI | Standards of medical/surgical practice |
| G0173 | 99307 | NCCI | Standards of medical/surgical practice |
| G0173 | 99308 | NCCI | Standards of medical/surgical practice |
| G0173 | 99309 | NCCI | Standards of medical/surgical practice |
| G0173 | 99310 | NCCI | Standards of medical/surgical practice |
| G0173 | 99315 | NCCI | Standards of medical/surgical practice |
| G0173 | 99316 | NCCI | Standards of medical/surgical practice |
| G0173 | 99318 | NCCI | Standards of medical/surgical practice |
| G0173 | 99324 | NCCI | Standards of medical/surgical practice |
| G0173 | 99325 | NCCI | Standards of medical/surgical practice |
| G0173 | 99326 | NCCI | Standards of medical/surgical practice |
| G0173 | 99327 | NCCI | Standards of medical/surgical practice |
| G0173 | 99328 | NCCI | Standards of medical/surgical practice |
| G0173 | 99334 | NCCI | Standards of medical/surgical practice |
| G0173 | 99335 | NCCI | Standards of medical/surgical practice |
| G0173 | 99336 | NCCI | Standards of medical/surgical practice |
| G0173 | 99337 | NCCI | Standards of medical/surgical practice |
| G0173 | 99341 | NCCI | Standards of medical/surgical practice |
| G0173 | 99342 | NCCI | Standards of medical/surgical practice |
| G0173 | 99343 | NCCI | Standards of medical/surgical practice |
| G0173 | 99344 | NCCI | Standards of medical/surgical practice |
| G0173 | 99345 | NCCI | Standards of medical/surgical practice |
| G0173 | 99347 | NCCI | Standards of medical/surgical practice |
| G0173 | 99348 | NCCI | Standards of medical/surgical practice |
| G0173 | 99349 | NCCI | Standards of medical/surgical practice |
| G0173 | 99350 | NCCI | Standards of medical/surgical practice |
| G0173 | 99360 | NCCI | Standards of medical/surgical practice |
| G0173 | 99431 | NCCI | Standards of medical/surgical practice |
| G0173 | 99432 | NCCI | Standards of medical/surgical practice |
| G0173 | 99433 | NCCI | Standards of medical/surgical practice |
| G0173 | 99435 | NCCI | Standards of medical/surgical practice |
| G0173 | 99436 | NCCI | Standards of medical/surgical practice |
| G0173 | 99440 | NCCI | Standards of medical/surgical practice |
| G0173 | 99455 | NCCI | Standards of medical/surgical practice |
| G0173 | 99456 | NCCI | Standards of medical/surgical practice |
| G0173 | 99477 | NCCI | Standard preparation/monitoring services for anesthesia |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0173 | G0251 | NCCI | Mutually exclusive procedures |
| G0173 | M0064 | NCCI | Standards of medical/surgical practice |
| G0179 | G0180 | NCCI | NCCI Mutually exclusive procedures |
| G0181 | 93040 | NCCI | NCCI Standards of medical / surgical practice |
| G0181 | 93041 | NCCI | NCCI Standards of medical / surgical practice |
| G0181 | 93042 | NCCI | NCCI Standards of medical / surgical practice |
| G0181 | G0102 | NCCI | NCCI Standards of medical / surgical practice |
| G0181 | G0182 | NCCI | NCCI Mutually exclusive procedures |
| G0182 | 93040 | NCCI | NCCI Standards of medical / surgical practice |
| G0182 | 93041 | NCCI | NCCI Standards of medical / surgical practice |
| G0182 | 93042 | NCCI | NCCI Standards of medical / surgical practice |
| G0182 | G0102 | NCCI | NCCI Standards of medical / surgical practice |
| G0186 | 67005 | NCCI | NCCI Standards of medical / surgical practice |
| G0186 | 67010 | NCCI | NCCI Standards of medical / surgical practice |
| G0186 | 67015 | NCCI | NCCI Standards of medical / surgical practice |
| G0186 | 67145 | NCCI | NCCI Standards of medical / surgical practice |
| G0186 | 67210 | NCCI | NCCI Mutually exclusive procedures |
| G0186 | 67220 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0186 | 67221 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0186 | 67228 | NCCI | NCCI Mutually exclusive procedures |
| G0186 | 67500 | NCCI | NCCI HCPCS/CPT separate procedure definition |
| G0186 | 69990 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| G0202 | 76150 | NCCI | NCCI HCPCS/CPT coding manual instruction / guideline |
| G0202 | 77057 | NCCI | Most extensive procedure |
| G0202 | G0202 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0204 | 76150 | NCCI | NCCI HCPCS/CPT coding manual instruction / guideline |
| G0204 | 77055 | NCCI | Most extensive procedure |
| G0204 | 77056 | NCCI | Most extensive procedure |
| G0204 | G0204 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0204 | G0206 | BCBST | NCCI Most extensive procedures / The edited code is considered an integral component of the listed code. |
| G0206 | 76150 | NCCI | NCCI HCPCS/CPT coding manual instruction / guideline |
| G0206 | 77055 | NCCI | Most extensive procedure |
| G0206 | G0206 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0219 | G0219 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0222 | G0220 | BCBST | Edited code is clinically inconsistent with the listed procedure in that a diagnostic examination would not be performed on the same day as a restaging examination. |

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BlueCross BlueShield of Tennessee-Coding Bundling Rules

Source: PNC-CARR

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0222 | G0221 | BCBST | Edited code is clinically inconsistent with the listed procedure in that an initial staging examination would not be performed on the same day as a restaging examination. |
| G0222 | G0222 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0231 | G0213 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0231 | G0214 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0231 | G0215 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0232 | G0213 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0232 | G0214 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0232 | G0215 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0237 | G0237 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0238 | G0238 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0239 | G0237 | NCCI | HCPCS/CPT procedure code definition |
| G0239 | G0238 | NCCI | Most extensive procedures |
| G0239 | G0239 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0245 | 0183T | NCCI | Misuse of column 2 code with column 1 code |
| G0245 | 11042 | NCCI | HCPCS/CPT coding manual instruction / guideline |
| G0245 | 11043 | NCCI | HCPCS/CPT coding manual instruction / guideline |
| G0245 | 11044 | NCCI | HCPCS/CPT coding manual instruction / guideline |
| G0245 | 11306 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0245 | 11307 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0245 | 11308 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0245 | 11420 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0245 | 11421 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0245 | 11422 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0245 | 11423 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0245 | 11424 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0245 | 11426 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0245 | 11755 | NCCI | HCPCS/CPT separate procedure definition |
| G0245 | 11765 | NCCI | Standards of medical / surgical practice |
| G0245 | 97597 | NCCI | Standards of medical / surgical practice |
| G0245 | 97598 | NCCI | Standards of medical / surgical practice |
| G0245 | 97602 | NCCI | Standards of medical/surgical practice |
| G0245 | 97605 | NCCI | Standards of medical/surgical practice |
| G0245 | 97606 | NCCI | Standards of medical/surgical practice |
| G0245 | G0127 | NCCI | HCPCS/CPT coding manual instruction / guideline |
| G0245 | G0245 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Print Date: 08/11/2008

BlueCross BlueShield of Tennessee-Coding Bundling Rules

Source: PNC-CARR

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0245 | G0246 | BCBST | NCCI Most extensive procedures / This code combination represents an incompatible linkage with conflicting, overlapping, or mutually exclusive elements. |
| G0245 | G0246 | NCCI | NCCI Most extensive procedures |
| G0246 | 0183T | NCCI | Misuse of column 2 code with column 1 code |
| G0246 | 11040 | NCCI | HCPCS/CPT coding manual instruction / guideline |
| G0246 | 11041 | NCCI | HCPCS/CPT coding manual instruction / guideline |
| G0246 | 11042 | NCCI | HCPCS/CPT coding manual instruction / guideline |
| G0246 | 11043 | NCCI | HCPCS/CPT coding manual instruction / guideline |
| G0246 | 11044 | NCCI | HCPCS/CPT coding manual instruction / guideline |
| G0246 | 11056 | NCCI | HCPCS/CPT coding manual instruction / guideline |
| G0246 | 11057 | NCCI | HCPCS/CPT coding manual instruction / guideline |
| G0246 | 11305 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0246 | 11306 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0246 | 11307 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0246 | 11308 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0246 | 11420 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0246 | 11421 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0246 | 11422 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0246 | 11423 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0246 | 11424 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0246 | 11426 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0246 | 11755 | NCCI | HCPCS/CPT separate procedure definition |
| G0246 | 11765 | NCCI | Standards of medical / surgical practice |
| G0246 | 97602 | NCCI | Standards of medical/surgical practice |
| G0246 | 97605 | NCCI | Standards of medical/surgical practice |
| G0246 | 97606 | NCCI | Standards of medical/surgical practice |
| G0246 | G0127 | NCCI | HCPCS/CPT coding manual instruction / guideline |
| G0246 | G0246 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0247 | 0183T | NCCI | Misuse of column 2 code with column 1 code |
| G0247 | 11040 | BCBST | NCCI HCPCS/CPT coding manual instruction / guideline / Edited code not allowed when used to report incidental debridement at the time of the definitive procedure. |
| G0247 | 11041 | BCBST | NCCI HCPCS/CPT coding manual instruction / guideline / Edited code not allowed when used to report incidental debridement at the time of the definitive procedure. |
| G0247 | 11042 | BCBST | NCCI HCPCS/CPT coding manual instruction / guideline / Edited code not allowed when used to report incidental debridement at the time of the definitive procedure. |
| G0247 | 11055 | BCBST | NCCI HCPCS/CPT coding manual instruction / guideline / Debridement of corns and calluses included in listed procedure. |
| G0247 | 11056 | BCBST | NCCI HCPCS/CPT coding manual instruction / guideline / Debridement of corns and calluses included in listed procedure. |
| G0247 | 11057 | BCBST | NCCI HCPCS/CPT coding manual instruction / guideline / Debridement of corns and calluses included in listed procedure. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0247 | 11719 | BCBST | NCCI HCPCS/CPT coding manual instruction / guideline / Trimming and debridement of nails included in listed procedure. |
| G0247 | 11720 | BCBST | NCCI HCPCS/CPT coding manual instruction / guideline / Trimming and debridement of nails included in listed procedure. |
| G0247 | 11721 | BCBST | NCCI HCPCS/CPT coding manual instruction / guideline / Trimming and debridement of nails included in listed procedure. |
| G0247 | 97602 | BCBST | Edited code not allowed if used to report simple debridement included in the listed procedure. |
| G0247 | 97602 | NCCI | Standards of medical/surgical practice |
| G0247 | 97605 | NCCI | Standards of medical/surgical practice |
| G0247 | 97606 | NCCI | Standards of medical/surgical practice |
| G0247 | G0127 | NCCI | NCCI HCPCS/CPT coding manual instruction / guideline |
| G0247 | G0127 | BCBST | NCCI HCPCS/CPT coding manual instruction / guideline / Trimming and debridement of nails included in listed procedure. |
| G0247 | G0247 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0247 | S0390 | BCBST | Edited code not allowed if used to report services included in the listed procedure. |
| G0248 | G0248 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0249 | G0249 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0250 | G0250 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0251 | 0073T | NCCI | Inappropriate Interpretation of CPT Code Definition |
| G0251 | 11920 | NCCI | Standards of medical/surgical practice |
| G0251 | 11921 | NCCI | Standards of medical/surgical practice |
| G0251 | 16000 | NCCI | Standards of medical/surgical practice |
| G0251 | 16020 | NCCI | Standards of medical/surgical practice |
| G0251 | 16025 | NCCI | Standards of medical/surgical practice |
| G0251 | 16030 | NCCI | Standards of medical/surgical practice |
| G0251 | 20660 | NCCI | HCPCS/CPT separate procedure definition |
| G0251 | 20661 | NCCI | Mutually exclusive procedures |
| G0251 | 20693 | NCCI | Mutually exclusive procedures |
| G0251 | 20694 | NCCI | Mutually exclusive procedures |
| G0251 | 36000 | NCCI | Standards of medical/surgical practice |
| G0251 | 36410 | NCCI | Standards of medical/surgical practice |
| G0251 | 61304 | NCCI | Mutually exclusive procedures |
| G0251 | 61305 | NCCI | Mutually exclusive procedures |
| G0251 | 61312 | NCCI | Mutually exclusive procedures |
| G0251 | 61313 | NCCI | Mutually exclusive procedures |
| G0251 | 61314 | NCCI | Mutually exclusive procedures |
| G0251 | 61315 | NCCI | Mutually exclusive procedures |
| G0251 | 61320 | NCCI | Mutually exclusive procedures |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0251 | 61321 | NCCI | Mutually exclusive procedures |
| G0251 | 61330 | NCCI | Mutually exclusive procedures |
| G0251 | 61332 | NCCI | Mutually exclusive procedures |
| G0251 | 61333 | NCCI | Mutually exclusive procedures |
| G0251 | 61440 | NCCI | Mutually exclusive procedures |
| G0251 | 61450 | NCCI | Mutually exclusive procedures |
| G0251 | 61458 | NCCI | Mutually exclusive procedures |
| G0251 | 61460 | NCCI | Mutually exclusive procedures |
| G0251 | 61470 | NCCI | Mutually exclusive procedures |
| G0251 | 61480 | NCCI | Mutually exclusive procedures |
| G0251 | 61490 | NCCI | Mutually exclusive procedures |
| G0251 | 61500 | NCCI | Mutually exclusive procedures |
| G0251 | 61510 | NCCI | Mutually exclusive procedures |
| G0251 | 61512 | NCCI | Mutually exclusive procedures |
| G0251 | 61514 | NCCI | Mutually exclusive procedures |
| G0251 | 61516 | NCCI | Mutually exclusive procedures |
| G0251 | 61518 | NCCI | Mutually exclusive procedures |
| G0251 | 61519 | NCCI | Mutually exclusive procedures |
| G0251 | 61520 | NCCI | Mutually exclusive procedures |
| G0251 | 61521 | NCCI | Mutually exclusive procedures |
| G0251 | 61522 | NCCI | Mutually exclusive procedures |
| G0251 | 61524 | NCCI | Mutually exclusive procedures |
| G0251 | 61530 | NCCI | Mutually exclusive procedures |
| G0251 | 61563 | NCCI | Mutually exclusive procedures |
| G0251 | 61564 | NCCI | Mutually exclusive procedures |
| G0251 | 61735 | NCCI | Mutually exclusive procedures |
| G0251 | 61793 | NCCI | Mutually exclusive procedures |
| G0251 | 61795 | NCCI | Standards of medical / surgical practice |
| G0251 | 69990 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0251 | 77321 | NCCI | Standards of medical / surgical practice |
| G0251 | 77326 | NCCI | Standards of medical / surgical practice |
| G0251 | 77327 | NCCI | Standards of medical / surgical practice |
| G0251 | 77328 | NCCI | Standards of medical / surgical practice |
| G0251 | 77401 | NCCI | Standards of medical / surgical practice |
| G0251 | 77402 | NCCI | Standards of medical / surgical practice |
| G0251 | 77403 | NCCI | Standards of medical / surgical practice |
| G0251 | 77404 | NCCI | Standards of medical / surgical practice |
| G0251 | 77406 | NCCI | Standards of medical / surgical practice |
| G0251 | 77407 | NCCI | Standards of medical / surgical practice |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0251 | 77408 | NCCI | Standards of medical / surgical practice |
| G0251 | 77409 | NCCI | Standards of medical / surgical practice |
| G0251 | 77411 | NCCI | Standards of medical / surgical practice |
| G0251 | 77412 | NCCI | Standards of medical / surgical practice |
| G0251 | 77413 | NCCI | Standards of medical / surgical practice |
| G0251 | 77414 | NCCI | Standards of medical / surgical practice |
| G0251 | 77416 | NCCI | Standards of medical / surgical practice |
| G0251 | 77418 | NCCI | Misuse of column 2 code with column 1 code |
| G0251 | 90804 | NCCI | Standards of medical/surgical practice |
| G0251 | 90805 | NCCI | Standards of medical/surgical practice |
| G0251 | 90806 | NCCI | Standards of medical/surgical practice |
| G0251 | 90807 | NCCI | Standards of medical/surgical practice |
| G0251 | 90808 | NCCI | Standards of medical/surgical practice |
| G0251 | 90809 | NCCI | Standards of medical/surgical practice |
| G0251 | 90810 | NCCI | Standards of medical/surgical practice |
| G0251 | 90811 | NCCI | Standards of medical/surgical practice |
| G0251 | 90812 | NCCI | Standards of medical/surgical practice |
| G0251 | 90813 | NCCI | Standards of medical/surgical practice |
| G0251 | 90814 | NCCI | Standards of medical/surgical practice |
| G0251 | 90815 | NCCI | Standards of medical/surgical practice |
| G0251 | 90816 | NCCI | Standards of medical/surgical practice |
| G0251 | 90817 | NCCI | Standards of medical/surgical practice |
| G0251 | 90818 | NCCI | Standards of medical/surgical practice |
| G0251 | 90819 | NCCI | Standards of medical/surgical practice |
| G0251 | 90821 | NCCI | Standards of medical/surgical practice |
| G0251 | 90822 | NCCI | Standards of medical/surgical practice |
| G0251 | 90847 | NCCI | Standards of medical/surgical practice |
| G0251 | 99201 | NCCI | Standards of medical / surgical practice |
| G0251 | 99201 | NCCI | Standard of medical/surgical practice |
| G0251 | 99202 | NCCI | Standards of medical / surgical practice |
| G0251 | 99202 | NCCI | Standard of medical/surgical practice |
| G0251 | 99203 | NCCI | Standards of medical / surgical practice |
| G0251 | 99203 | NCCI | Standard of medical/surgical practice |
| G0251 | 99204 | NCCI | Standards of medical / surgical practice |
| G0251 | 99204 | NCCI | Standard of medical/surgical practice |
| G0251 | 99205 | NCCI | Standards of medical / surgical practice |
| G0251 | 99205 | NCCI | Standard of medical/surgical practice |
| G0251 | 99211 | NCCI | Standards of medical / surgical practice |
| G0251 | 99211 | NCCI | Standard of medical/surgical practice |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0251 | 99212 | NCCI | Standards of medical / surgical practice |
| G0251 | 99212 | NCCI | Standard of medical/surgical practice |
| G0251 | 99213 | NCCI | Standards of medical / surgical practice |
| G0251 | 99213 | NCCI | Standard of medical/surgical practice |
| G0251 | 99214 | NCCI | Standards of medical / surgical practice |
| G0251 | 99214 | NCCI | Standard of medical/surgical practice |
| G0251 | 99215 | NCCI | Standards of medical / surgical practice |
| G0251 | 99215 | NCCI | Standard of medical/surgical practice |
| G0251 | 99217 | NCCI | Standards of medical / surgical practice |
| G0251 | 99217 | NCCI | Standard of medical/surgical practice |
| G0251 | 99218 | NCCI | Standards of medical / surgical practice |
| G0251 | 99218 | NCCI | Standard of medical/surgical practice |
| G0251 | 99219 | NCCI | Standards of medical / surgical practice |
| G0251 | 99219 | NCCI | Standard of medical/surgical practice |
| G0251 | 99220 | NCCI | Standards of medical / surgical practice |
| G0251 | 99220 | NCCI | Standard of medical/surgical practice |
| G0251 | 99221 | NCCI | Standards of medical / surgical practice |
| G0251 | 99221 | NCCI | Standard of medical/surgical practice |
| G0251 | 99222 | NCCI | Standards of medical / surgical practice |
| G0251 | 99222 | NCCI | Standard of medical/surgical practice |
| G0251 | 99223 | NCCI | Standards of medical / surgical practice |
| G0251 | 99223 | NCCI | Standard of medical/surgical practice |
| G0251 | 99231 | NCCI | Standards of medical / surgical practice |
| G0251 | 99231 | NCCI | Standard of medical/surgical practice |
| G0251 | 99232 | NCCI | Standards of medical / surgical practice |
| G0251 | 99232 | NCCI | Standard of medical/surgical practice |
| G0251 | 99233 | NCCI | Standards of medical / surgical practice |
| G0251 | 99233 | NCCI | Standard of medical/surgical practice |
| G0251 | 99234 | NCCI | Standards of medical/surgical practice |
| G0251 | 99235 | NCCI | Standards of medical/surgical practice |
| G0251 | 99236 | NCCI | Standards of medical/surgical practice |
| G0251 | 99238 | NCCI | Standards of medical / surgical practice |
| G0251 | 99238 | NCCI | Standard of medical/surgical practice |
| G0251 | 99239 | NCCI | Standards of medical / surgical practice |
| G0251 | 99239 | NCCI | Standard of medical/surgical practice |
| G0251 | 99281 | NCCI | Standards of medical / surgical practice |
| G0251 | 99281 | NCCI | Standard of medical/surgical practice |
| G0251 | 99282 | NCCI | Standards of medical / surgical practice |
| G0251 | 99282 | NCCI | Standard of medical/surgical practice |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0251 | 99283 | NCCI | Standards of medical / surgical practice |
| G0251 | 99283 | NCCI | Standard of medical/surgical practice |
| G0251 | 99284 | NCCI | Standards of medical / surgical practice |
| G0251 | 99284 | NCCI | Standard of medical/surgical practice |
| G0251 | 99285 | NCCI | Standards of medical / surgical practice |
| G0251 | 99285 | NCCI | Standard of medical/surgical practice |
| G0251 | 99289 | NCCI | Standards of medical/surgical practice |
| G0251 | 99290 | NCCI | Standards of medical/surgical practice |
| G0251 | 99291 | NCCI | Standards of medical / surgical practice |
| G0251 | 99291 | NCCI | Standard of medical/surgical practice |
| G0251 | 99292 | NCCI | Standards of medical / surgical practice |
| G0251 | 99292 | NCCI | Standard of medical/surgical practice |
| G0251 | 99293 | NCCI | Standards of medical/surgical practice |
| G0251 | 99294 | NCCI | Standards of medical/surgical practice |
| G0251 | 99295 | NCCI | Standards of medical/surgical practice |
| G0251 | 99296 | NCCI | Standards of medical/surgical practice |
| G0251 | 99298 | NCCI | Standards of medical/surgical practice |
| G0251 | 99299 | NCCI | Standards of medical/surgical practice |
| G0251 | 99300 | NCCI | Standards of medical/surgical practice |
| G0251 | 99315 | NCCI | Standards of medical / surgical practice |
| G0251 | 99315 | NCCI | Standard of medical/surgical practice |
| G0251 | 99316 | NCCI | Standards of medical / surgical practice |
| G0251 | 99316 | NCCI | Standard of medical/surgical practice |
| G0251 | 99341 | NCCI | Standards of medical / surgical practice |
| G0251 | 99341 | NCCI | Standard of medical/surgical practice |
| G0251 | 99342 | NCCI | Standards of medical / surgical practice |
| G0251 | 99342 | NCCI | Standard of medical/surgical practice |
| G0251 | 99343 | NCCI | Standards of medical / surgical practice |
| G0251 | 99343 | NCCI | Standard of medical/surgical practice |
| G0251 | 99344 | NCCI | Standards of medical/surgical practice |
| G0251 | 99345 | NCCI | Standards of medical/surgical practice |
| G0251 | 99347 | NCCI | Standards of medical / surgical practice |
| G0251 | 99348 | NCCI | Standards of medical / surgical practice |
| G0251 | 99349 | NCCI | Standards of medical / surgical practice |
| G0251 | 99350 | NCCI | Standards of medical/surgical practice |
| G0251 | 99354 | NCCI | Standards of medical / surgical practice |
| G0251 | 99354 | NCCI | Standard of medical/surgical practice |
| G0251 | 99355 | NCCI | Standards of medical / surgical practice |
| G0251 | 99355 | NCCI | Standard of medical/surgical practice |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0251 | 99356 | NCCI | Standards of medical / surgical practice |
| G0251 | 99356 | NCCI | Standard of medical/surgical practice |
| G0251 | 99357 | NCCI | Standards of medical / surgical practice |
| G0251 | 99357 | NCCI | Standard of medical/surgical practice |
| G0251 | 99360 | NCCI | Standards of medical / surgical practice |
| G0251 | 99360 | NCCI | Standard of medical/surgical practice |
| G0251 | 99431 | NCCI | Standards of medical/surgical practice |
| G0251 | 99432 | NCCI | Standards of medical/surgical practice |
| G0251 | 99433 | NCCI | Standards of medical/surgical practice |
| G0251 | 99435 | NCCI | Standards of medical/surgical practice |
| G0251 | 99436 | NCCI | Standards of medical/surgical practice |
| G0251 | 99440 | NCCI | Standards of medical/surgical practice |
| G0251 | 99455 | NCCI | Standards of medical/surgical practice |
| G0251 | 99456 | NCCI | Standards of medical/surgical practice |
| G0251 | 99477 | NCCI | Standard preparation/monitoring services for anesthesia |
| G0251 | G0251 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0252 | G0252 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0257 | G0257 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0259 | 27096 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0259 | 37202 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0259 | 62318 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0259 | 62319 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0259 | 64415 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0259 | 64417 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0259 | 64450 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0259 | 64470 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0259 | 64475 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0259 | 77002 | NCCI | HCPCS/CPT coding manual instruction/guideline |
| G0259 | G0260 | BCBST | This service, supply, or equipment is considered a component of the listed code or represents an alternative service, supply or equipment which is generally redundant to the listed code. |
| G0265 | G0265 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0266 | G0266 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0267 | G0267 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0268 | 37202 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0268 | 51701 | NCCI | Standards of medical/surgical practice |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0268 | 51702 | NCCI | Standards of medical/surgical practice |
| G0268 | 51703 | NCCI | Standards of medical/surgical practice |
| G0268 | 62318 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0268 | 62319 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0268 | 64415 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0268 | 64417 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0268 | 64450 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0268 | 64470 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0268 | 64475 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0268 | 69990 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0268 | 90760 | NCCI | Standards of medical/surgical practice |
| G0268 | 90765 | NCCI | Standards of medical/surgical practice |
| G0268 | 90772 | NCCI | Standards of medical/surgical practice |
| G0268 | 90774 | NCCI | Standards of medical/surgical practice |
| G0268 | 90775 | NCCI | Standards of medical/surgical practice |
| G0268 | 92504 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0268 | G0268 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0270 | G0270 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0270 | G0271 | BCBST | This service, supply, or equipment is considered a component of the listed code or represents an alternative service, supply or equipment which is generally redundant to the listed code. |
| G0271 | G0271 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0275 | 36140 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0275 | 36200 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0275 | 36245 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0275 | 36246 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0275 | 36247 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0275 | 75625 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0275 | 75630 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0275 | 76942 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0275 | 77002 | NCCI | Misuse of column 2 code with column 1 code |
| G0275 | G0275 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0278 | 36140 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0278 | 36200 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0278 | 36245 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0278 | 36246 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0278 | 36247 | NCCI | Misuse of Column 2 code with Column 1 code |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0278 | 75625 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0278 | 75630 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0278 | 75710 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0278 | 75716 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0278 | 76942 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0278 | 77002 | NCCI | Misuse of column 2 code with column 1 code |
| G0278 | G0278 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0281 | 64550 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0281 | 97002 | NCCI | Standards of medical / surgical practice |
| G0281 | 97004 | NCCI | Standards of medical / surgical practice |
| G0281 | 97032 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0281 | 99186 | NCCI | Mutually exclusive procedures |
| G0281 | G0281 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0281 | G0283 | NCCI | Mutually exclusive procedures |
| G0282 | G0282 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0283 | 97002 | NCCI | Standards of medical / surgical practice |
| G0283 | 97004 | NCCI | Standards of medical / surgical practice |
| G0283 | 97032 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0283 | 99186 | NCCI | Mutually exclusive procedures |
| G0283 | G0283 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0288 | 76376 | NCCI | Standards of medical/surgical practice |
| G0288 | 76377 | NCCI | Standards of medical/surgical practice |
| G0288 | G0288 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0290 | 01924 | NCCI | Anesthesia included in surgical procedures |
| G0290 | 01925 | NCCI | Anesthesia included in surgical procedures |
| G0290 | 01926 | NCCI | Anesthesia included in surgical procedures |
| G0290 | 34812 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0290 | 35201 | BCBST | Edited code not allowed when used to report vessel repair required in the course of performing the definitive procedure. |
| G0290 | 35206 | BCBST | Edited code not allowed when used to report vessel repair required in the course of performing the definitive procedure. |
| G0290 | 35226 | BCBST | Edited code not allowed when used to report vessel repair required in the course of performing the definitive procedure. |
| G0290 | 35261 | BCBST | Edited code not allowed when used to report vessel repair required in the course of performing the definitive procedure. |
| G0290 | 35266 | BCBST | Edited code not allowed when used to report vessel repair required in the course of performing the definitive procedure. |
| G0290 | 35286 | BCBST | Edited code not allowed when used to report vessel repair required in the course of performing the definitive procedure. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0290 | 36000 | BCBST | Edited code not allowed if used to report incidental needle introduction at the time of the listed procedure. Similar listed codes with edit disallowed according to NCCI Standards of medical / surgical practice. |
| G0290 | 36120 | BCBST | Edited code not allowed when used to report placement of catheter included as part of the definitive procedure. |
| G0290 | 36140 | BCBST | Edited code not allowed when used to report introduction of needle or intracatheter required to perform the definitive procedure. |
| G0290 | 36200 | BCBST | Edited code not allowed when used to report placement of catheter included as part of the definitive procedure. |
| G0290 | 36600 | BCBST | Edited code not allowed if used to report incidental arterial puncture at the time of the listed procedure. |
| G0290 | 36620 | BCBST | Edited code not allowed if used to report incidental arterial catheterization at the time of the listed procedure. |
| G0290 | 36625 | BCBST | Edited code not allowed if used to report incidental arterial catheterization at the time of the listed procedure. |
| G0290 | 36640 | BCBST | Edited code not allowed if used to report catheterization included in the listed procedure. |
| G0290 | 37202 | BCBST | The edited code is a component of the listed code if used to report minor anesthesia or infusion services provided as part of the listed procedure or according to surgical package instructions. Similar listed codes with edit disallowed according to NCCI Misuse of Column 2 code with Column 1 code policy, which indicates that a provider should not report a CPT code out of the context for which it was intended. Note, however, that it may be appropriate to reimburse this procedure if it is performed for indicated purposes separately from the comprehensive procedure. |
| G0290 | 76000 | CPT | Edited code not allowed when used to report fluoroscopy required to perform the definitive procedure. |
| G0290 | 76001 | CPT | Edited code not allowed when used to report fluoroscopy required to perform the definitive procedure. |
| G0290 | 90760 | NCCI | Standards of medical/surgical practice |
| G0290 | 90765 | NCCI | Standards of medical/surgical practice |
| G0290 | 92975 | BCBST | Clinically unlikely code combination or component. Review before reimbursing the edited code. |
| G0290 | 92980 | BCBST | This code combination represents an incompatible linkage with conflicting, overlapping, or mutually exclusive elements. |
| G0290 | 92982 | BCBST | This code combination represents an incompatible linkage with conflicting, overlapping, or mutually exclusive elements. |
| G0290 | 92995 | BCBST | This code combination represents an incompatible linkage with conflicting, overlapping, or mutually exclusive elements. |
| G0290 | 93040 | BCBST | Edited code not allowed if used to report ECG monitoring in the course of performing the listed procedure. |
| G0290 | 93041 | BCBST | Edited code not allowed if used to report ECG monitoring in the course of performing the listed procedure. |
| G0290 | 93042 | BCBST | Edited code not allowed if used to report ECG monitoring in the course of performing the listed procedure. |
| G0290 | G0290 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0291 | 01924 | NCCI | Anesthesia included in surgical procedures |
| G0291 | 01925 | NCCI | Anesthesia included in surgical procedures |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0291 | 01926 | NCCI | Anesthesia included in surgical procedures |
| G0291 | 34812 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0291 | 35206 | NCCI | Standards of medical / surgical practice |
| G0291 | 35226 | NCCI | Standards of medical / surgical practice |
| G0291 | 36120 | NCCI | Standards of medical / surgical practice |
| G0291 | 36140 | NCCI | Standards of medical / surgical practice |
| G0291 | 36200 | NCCI | Standards of medical / surgical practice |
| G0291 | 36600 | NCCI | Standards of medical / surgical practice |
| G0291 | 36620 | NCCI | Standards of medical / surgical practice |
| G0291 | 36625 | NCCI | Standards of medical / surgical practice |
| G0291 | 37202 | NCCI | Standards of medical / surgical practice |
| G0291 | 90760 | NCCI | Standards of medical/surgical practice |
| G0291 | 90765 | NCCI | Standards of medical/surgical practice |
| G0291 | 92975 | NCCI | HCPCS/CPT procedure code definition |
| G0291 | 92980 | NCCI | HCPCS/CPT procedure code definition |
| G0291 | 92982 | NCCI | HCPCS/CPT procedure code definition |
| G0291 | 92995 | NCCI | HCPCS/CPT procedure code definition |
| G0291 | 93040 | NCCI | Standards of medical / surgical practice |
| G0291 | 93041 | NCCI | Standards of medical / surgical practice |
| G0291 | 93042 | NCCI | Standards of medical / surgical practice |
| G0291 | 93555 | NCCI | Standards of medical / surgical practice |
| G0291 | 93556 | NCCI | Standards of medical / surgical practice |
| G0293 | G0293 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0294 | G0294 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0295 | G0295 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G0302 | 99300 | NCCI | HCPCS/CPT procedure code definition |
| G0302 | 99304 | NCCI | HCPCS/CPT procedure code definition |
| G0302 | 99305 | NCCI | HCPCS/CPT procedure code definition |
| G0302 | 99306 | NCCI | HCPCS/CPT procedure code definition |
| G0302 | 99307 | NCCI | HCPCS/CPT procedure code definition |
| G0302 | 99308 | NCCI | HCPCS/CPT procedure code definition |
| G0302 | 99309 | NCCI | HCPCS/CPT procedure code definition |
| G0302 | 99310 | NCCI | HCPCS/CPT procedure code definition |
| G0302 | 99318 | NCCI | HCPCS/CPT procedure code definition |
| G0302 | 99324 | NCCI | HCPCS/CPT procedure code definition |
| G0302 | 99325 | NCCI | HCPCS/CPT procedure code definition |
| G0302 | 99326 | NCCI | HCPCS/CPT procedure code definition |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|-------------------------------------|
| G0302 | 99327 | NCCI | HCPCS/CPT procedure code definition |
| G0302 | 99328 | NCCI | HCPCS/CPT procedure code definition |
| G0302 | 99334 | NCCI | HCPCS/CPT procedure code definition |
| G0302 | 99335 | NCCI | HCPCS/CPT procedure code definition |
| G0302 | 99336 | NCCI | HCPCS/CPT procedure code definition |
| G0302 | 99337 | NCCI | HCPCS/CPT procedure code definition |
| G0302 | 99477 | NCCI | HCPCS/CPT procedure code definition |
| G0302 | G0303 | NCCI | Most extensive procedure |
| G0302 | G0304 | NCCI | Most extensive procedure |
| G0303 | 99300 | NCCI | HCPCS/CPT procedure code definition |
| G0303 | 99304 | NCCI | HCPCS/CPT procedure code definition |
| G0303 | 99305 | NCCI | HCPCS/CPT procedure code definition |
| G0303 | 99306 | NCCI | HCPCS/CPT procedure code definition |
| G0303 | 99307 | NCCI | HCPCS/CPT procedure code definition |
| G0303 | 99308 | NCCI | HCPCS/CPT procedure code definition |
| G0303 | 99309 | NCCI | HCPCS/CPT procedure code definition |
| G0303 | 99310 | NCCI | HCPCS/CPT procedure code definition |
| G0303 | 99318 | NCCI | HCPCS/CPT procedure code definition |
| G0303 | 99324 | NCCI | HCPCS/CPT procedure code definition |
| G0303 | 99325 | NCCI | HCPCS/CPT procedure code definition |
| G0303 | 99326 | NCCI | HCPCS/CPT procedure code definition |
| G0303 | 99327 | NCCI | HCPCS/CPT procedure code definition |
| G0303 | 99328 | NCCI | HCPCS/CPT procedure code definition |
| G0303 | 99334 | NCCI | HCPCS/CPT procedure code definition |
| G0303 | 99335 | NCCI | HCPCS/CPT procedure code definition |
| G0303 | 99336 | NCCI | HCPCS/CPT procedure code definition |
| G0303 | 99337 | NCCI | HCPCS/CPT procedure code definition |
| G0303 | 99477 | NCCI | HCPCS/CPT procedure code definition |
| G0303 | G0304 | NCCI | Most extensive procedure |
| G0304 | 99300 | NCCI | HCPCS/CPT procedure code definition |
| G0304 | 99304 | NCCI | HCPCS/CPT procedure code definition |
| G0304 | 99305 | NCCI | HCPCS/CPT procedure code definition |
| G0304 | 99306 | NCCI | HCPCS/CPT procedure code definition |
| G0304 | 99307 | NCCI | HCPCS/CPT procedure code definition |
| G0304 | 99308 | NCCI | HCPCS/CPT procedure code definition |
| G0304 | 99309 | NCCI | HCPCS/CPT procedure code definition |
| G0304 | 99310 | NCCI | HCPCS/CPT procedure code definition |
| G0304 | 99318 | NCCI | HCPCS/CPT procedure code definition |
| G0304 | 99324 | NCCI | HCPCS/CPT procedure code definition |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|--|
| G0304 | 99325 | NCCI | HCPCS/CPT procedure code definition |
| G0304 | 99326 | NCCI | HCPCS/CPT procedure code definition |
| G0304 | 99327 | NCCI | HCPCS/CPT procedure code definition |
| G0304 | 99328 | NCCI | HCPCS/CPT procedure code definition |
| G0304 | 99334 | NCCI | HCPCS/CPT procedure code definition |
| G0304 | 99335 | NCCI | HCPCS/CPT procedure code definition |
| G0304 | 99336 | NCCI | HCPCS/CPT procedure code definition |
| G0304 | 99337 | NCCI | HCPCS/CPT procedure code definition |
| G0304 | 99477 | NCCI | HCPCS/CPT procedure code definition |
| G0305 | 99300 | NCCI | HCPCS/CPT procedure code definition |
| G0305 | 99304 | NCCI | HCPCS/CPT procedure code definition |
| G0305 | 99305 | NCCI | HCPCS/CPT procedure code definition |
| G0305 | 99306 | NCCI | HCPCS/CPT procedure code definition |
| G0305 | 99307 | NCCI | HCPCS/CPT procedure code definition |
| G0305 | 99308 | NCCI | HCPCS/CPT procedure code definition |
| G0305 | 99309 | NCCI | HCPCS/CPT procedure code definition |
| G0305 | 99310 | NCCI | HCPCS/CPT procedure code definition |
| G0305 | 99318 | NCCI | HCPCS/CPT procedure code definition |
| G0305 | 99324 | NCCI | HCPCS/CPT procedure code definition |
| G0305 | 99325 | NCCI | HCPCS/CPT procedure code definition |
| G0305 | 99326 | NCCI | HCPCS/CPT procedure code definition |
| G0305 | 99327 | NCCI | HCPCS/CPT procedure code definition |
| G0305 | 99328 | NCCI | HCPCS/CPT procedure code definition |
| G0305 | 99334 | NCCI | HCPCS/CPT procedure code definition |
| G0305 | 99335 | NCCI | HCPCS/CPT procedure code definition |
| G0305 | 99336 | NCCI | HCPCS/CPT procedure code definition |
| G0305 | 99337 | NCCI | HCPCS/CPT procedure code definition |
| G0305 | 99477 | NCCI | HCPCS/CPT procedure code definition |
| G0320 | G0309 | NCCI | Mutually exclusive procedures |
| G0321 | G0312 | NCCI | Mutually exclusive procedures |
| G0321 | G0315 | NCCI | Mutually exclusive procedures |
| G0323 | G0318 | NCCI | Mutually exclusive procedures |
| G0328 | 82272 | NCCI | Most extensive procedure |
| G0337 | 90804 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0337 | 90805 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0337 | 90810 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0337 | 90816 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0337 | 90817 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0337 | 90823 | NCCI | Misuse of Column 2 code with Column 1 code |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|---|
| G0337 | 90849 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0337 | 90853 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0337 | 90857 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0337 | 90862 | NCCI | Standards of medical / surgical practice |
| G0337 | 92002 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0337 | 92012 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0337 | 95831 | NCCI | Standards of medical / surgical practice |
| G0337 | 95832 | NCCI | Standards of medical / surgical practice |
| G0337 | 95833 | NCCI | Standards of medical / surgical practice |
| G0337 | 95834 | NCCI | Standards of medical / surgical practice |
| G0337 | 95851 | NCCI | Standards of medical / surgical practice |
| G0337 | 95852 | NCCI | Standards of medical / surgical practice |
| G0337 | 96116 | NCCI | HCPCS/CPT coding manual instruction/guideline |
| G0337 | 96150 | NCCI | HCPCS/CPT coding manual instruction / guideline |
| G0337 | 96151 | NCCI | HCPCS/CPT coding manual instruction / guideline |
| G0337 | 96152 | NCCI | HCPCS/CPT coding manual instruction / guideline |
| G0337 | 96153 | NCCI | HCPCS/CPT coding manual instruction / guideline |
| G0337 | 96154 | NCCI | HCPCS/CPT coding manual instruction / guideline |
| G0337 | 97802 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0337 | 97803 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0337 | 97804 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0337 | 99201 | NCCI | Mutually exclusive procedures |
| G0337 | 99202 | NCCI | Mutually exclusive procedures |
| G0337 | 99211 | NCCI | Mutually exclusive procedures |
| G0337 | 99212 | NCCI | Mutually exclusive procedures |
| G0337 | 99213 | NCCI | Mutually exclusive procedures |
| G0337 | G0101 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0337 | G0102 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0337 | G0117 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0337 | G0118 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0337 | G0245 | NCCI | Standards of medical / surgical practice |
| G0337 | G0246 | NCCI | Standards of medical / surgical practice |
| G0337 | G0250 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0337 | G0270 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0337 | G0271 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0337 | M0064 | NCCI | Standards of medical / surgical practice |
| G0337 | P3000 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0337 | P3001 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0337 | Q0091 | NCCI | Misuse of Column 2 code with Column 1 code |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|--|
| G0339 | 11920 | NCCI | Standards of medical/surgical practice |
| G0339 | 11921 | NCCI | Standards of medical/surgical practice |
| G0339 | 16000 | NCCI | Standards of medical/surgical practice |
| G0339 | 16020 | NCCI | Standards of medical/surgical practice |
| G0339 | 16025 | NCCI | Standards of medical/surgical practice |
| G0339 | 16030 | NCCI | Standards of medical/surgical practice |
| G0339 | 36000 | NCCI | Standards of medical/surgical practice |
| G0339 | 36410 | NCCI | Standards of medical/surgical practice |
| G0339 | 90804 | NCCI | Standards of medical/surgical practice |
| G0339 | 90805 | NCCI | Standards of medical/surgical practice |
| G0339 | 90806 | NCCI | Standards of medical/surgical practice |
| G0339 | 90807 | NCCI | Standards of medical/surgical practice |
| G0339 | 90808 | NCCI | Standards of medical/surgical practice |
| G0339 | 90809 | NCCI | Standards of medical/surgical practice |
| G0339 | 90810 | NCCI | Standards of medical/surgical practice |
| G0339 | 90811 | NCCI | Standards of medical/surgical practice |
| G0339 | 90812 | NCCI | Standards of medical/surgical practice |
| G0339 | 90813 | NCCI | Standards of medical/surgical practice |
| G0339 | 90814 | NCCI | Standards of medical/surgical practice |
| G0339 | 90815 | NCCI | Standards of medical/surgical practice |
| G0339 | 90816 | NCCI | Standards of medical/surgical practice |
| G0339 | 90817 | NCCI | Standards of medical/surgical practice |
| G0339 | 90818 | NCCI | Standards of medical/surgical practice |
| G0339 | 90819 | NCCI | Standards of medical/surgical practice |
| G0339 | 90821 | NCCI | Standards of medical/surgical practice |
| G0339 | 90822 | NCCI | Standards of medical/surgical practice |
| G0339 | 90847 | NCCI | Standards of medical/surgical practice |
| G0339 | 99234 | NCCI | Standards of medical/surgical practice |
| G0339 | 99235 | NCCI | Standards of medical/surgical practice |
| G0339 | 99236 | NCCI | Standards of medical/surgical practice |
| G0339 | 99289 | NCCI | Standards of medical/surgical practice |
| G0339 | 99290 | NCCI | Standards of medical/surgical practice |
| G0339 | 99293 | NCCI | Standards of medical/surgical practice |
| G0339 | 99294 | NCCI | Standards of medical/surgical practice |
| G0339 | 99295 | NCCI | Standards of medical/surgical practice |
| G0339 | 99296 | NCCI | Standards of medical/surgical practice |
| G0339 | 99298 | NCCI | Standards of medical/surgical practice |
| G0339 | 99299 | NCCI | Standards of medical/surgical practice |
| G0339 | 99300 | NCCI | Standards of medical/surgical practice |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| G0339 | 99344 | NCCI | Standards of medical/surgical practice |
| G0339 | 99345 | NCCI | Standards of medical/surgical practice |
| G0339 | 99350 | NCCI | Standards of medical/surgical practice |
| G0339 | 99431 | NCCI | Standards of medical/surgical practice |
| G0339 | 99432 | NCCI | Standards of medical/surgical practice |
| G0339 | 99433 | NCCI | Standards of medical/surgical practice |
| G0339 | 99435 | NCCI | Standards of medical/surgical practice |
| G0339 | 99436 | NCCI | Standards of medical/surgical practice |
| G0339 | 99440 | NCCI | Standards of medical/surgical practice |
| G0339 | 99455 | NCCI | Standards of medical/surgical practice |
| G0339 | 99456 | NCCI | Standards of medical/surgical practice |
| G0339 | 99477 | NCCI | Standard preparation/monitoring services for anesthesia |
| G0339 | G0340 | NCCI | Mutually exclusive procedures |
| G0340 | 11920 | NCCI | Standards of medical/surgical practice |
| G0340 | 11921 | NCCI | Standards of medical/surgical practice |
| G0340 | 16000 | NCCI | Standards of medical/surgical practice |
| G0340 | 16020 | NCCI | Standards of medical/surgical practice |
| G0340 | 16025 | NCCI | Standards of medical/surgical practice |
| G0340 | 16030 | NCCI | Standards of medical/surgical practice |
| G0340 | 36000 | NCCI | Standards of medical/surgical practice |
| G0340 | 36410 | NCCI | Standards of medical/surgical practice |
| G0340 | 90804 | NCCI | Standards of medical/surgical practice |
| G0340 | 90805 | NCCI | Standards of medical/surgical practice |
| G0340 | 90806 | NCCI | Standards of medical/surgical practice |
| G0340 | 90807 | NCCI | Standards of medical/surgical practice |
| G0340 | 90808 | NCCI | Standards of medical/surgical practice |
| G0340 | 90809 | NCCI | Standards of medical/surgical practice |
| G0340 | 90810 | NCCI | Standards of medical/surgical practice |
| G0340 | 90811 | NCCI | Standards of medical/surgical practice |
| G0340 | 90812 | NCCI | Standards of medical/surgical practice |
| G0340 | 90813 | NCCI | Standards of medical/surgical practice |
| G0340 | 90814 | NCCI | Standards of medical/surgical practice |
| G0340 | 90815 | NCCI | Standards of medical/surgical practice |
| G0340 | 90816 | NCCI | Standards of medical/surgical practice |
| G0340 | 90817 | NCCI | Standards of medical/surgical practice |
| G0340 | 90818 | NCCI | Standards of medical/surgical practice |
| G0340 | 90819 | NCCI | Standards of medical/surgical practice |
| G0340 | 90821 | NCCI | Standards of medical/surgical practice |
| G0340 | 90822 | NCCI | Standards of medical/surgical practice |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| G0340 | 90847 | NCCI | Standards of medical/surgical practice |
| G0340 | 99234 | NCCI | Standards of medical/surgical practice |
| G0340 | 99235 | NCCI | Standards of medical/surgical practice |
| G0340 | 99236 | NCCI | Standards of medical/surgical practice |
| G0340 | 99289 | NCCI | Standards of medical/surgical practice |
| G0340 | 99290 | NCCI | Standards of medical/surgical practice |
| G0340 | 99293 | NCCI | Standards of medical/surgical practice |
| G0340 | 99294 | NCCI | Standards of medical/surgical practice |
| G0340 | 99295 | NCCI | Standards of medical/surgical practice |
| G0340 | 99296 | NCCI | Standards of medical/surgical practice |
| G0340 | 99298 | NCCI | Standards of medical/surgical practice |
| G0340 | 99299 | NCCI | Standards of medical/surgical practice |
| G0340 | 99300 | NCCI | Standards of medical/surgical practice |
| G0340 | 99344 | NCCI | Standards of medical/surgical practice |
| G0340 | 99345 | NCCI | Standards of medical/surgical practice |
| G0340 | 99350 | NCCI | Standards of medical/surgical practice |
| G0340 | 99431 | NCCI | Standards of medical/surgical practice |
| G0340 | 99432 | NCCI | Standards of medical/surgical practice |
| G0340 | 99433 | NCCI | Standards of medical/surgical practice |
| G0340 | 99435 | NCCI | Standards of medical/surgical practice |
| G0340 | 99436 | NCCI | Standards of medical/surgical practice |
| G0340 | 99440 | NCCI | Standards of medical/surgical practice |
| G0340 | 99455 | NCCI | Standards of medical/surgical practice |
| G0340 | 99456 | NCCI | Standards of medical/surgical practice |
| G0340 | 99477 | NCCI | Standard preparation/monitoring services for anesthesia |
| G0341 | 51701 | NCCI | Standards of medical/surgical practice |
| G0341 | 51702 | NCCI | Standards of medical/surgical practice |
| G0341 | 51703 | NCCI | Standards of medical/surgical practice |
| G0341 | 76998 | NCCI | Misuse of column 2 code with column 1 code |
| G0341 | 77002 | NCCI | Misuse of column 2 code with column 1 code |
| G0341 | 90760 | NCCI | Standards of medical/surgical practice |
| G0341 | 90765 | NCCI | Standards of medical/surgical practice |
| G0341 | 90772 | NCCI | Standards of medical/surgical practice |
| G0341 | 90774 | NCCI | Standards of medical/surgical practice |
| G0341 | 90775 | NCCI | Standards of medical/surgical practice |
| G0342 | 44180 | NCCI | HCPCS/CPT separate procedure definition |
| G0342 | 51701 | NCCI | Standards of medical/surgical practice |
| G0342 | 51702 | NCCI | Standards of medical/surgical practice |
| G0342 | 51703 | NCCI | Standards of medical/surgical practice |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0342 | 76998 | NCCI | Misuse of column 2 code with column 1 code |
| G0342 | 77002 | NCCI | Misuse of column 2 code with column 1 code |
| G0342 | 90760 | NCCI | Standards of medical/surgical practice |
| G0342 | 90765 | NCCI | Standards of medical/surgical practice |
| G0342 | 90772 | NCCI | Standards of medical/surgical practice |
| G0342 | 90774 | NCCI | Standards of medical/surgical practice |
| G0342 | 90775 | NCCI | Standards of medical/surgical practice |
| G0343 | 44180 | NCCI | HCPCS/CPT separate procedure definition |
| G0343 | 51701 | NCCI | Standards of medical/surgical practice |
| G0343 | 51702 | NCCI | Standards of medical/surgical practice |
| G0343 | 51703 | NCCI | Standards of medical/surgical practice |
| G0343 | 76998 | NCCI | Misuse of column 2 code with column 1 code |
| G0343 | 77002 | NCCI | Misuse of column 2 code with column 1 code |
| G0343 | 90760 | NCCI | Standards of medical/surgical practice |
| G0343 | 90765 | NCCI | Standards of medical/surgical practice |
| G0343 | 90772 | NCCI | Standards of medical/surgical practice |
| G0343 | 90774 | NCCI | Standards of medical/surgical practice |
| G0343 | 90775 | NCCI | Standards of medical/surgical practice |
| G0344 | 90804 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0344 | 90805 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0344 | 90810 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0344 | 90811 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0344 | 90816 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0344 | 90817 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0344 | 90823 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0344 | 90824 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0344 | 90845 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0344 | 90862 | NCCI | Standards of medical / surgical practice |
| G0344 | 92002 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0344 | 92012 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0344 | 92014 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0344 | 93000 | NCCI | Standards of medical / surgical practice |
| G0344 | 93005 | NCCI | Standards of medical / surgical practice |
| G0344 | 93010 | NCCI | Standards of medical / surgical practice |
| G0344 | 93014 | NCCI | Standards of medical / surgical practice |
| G0344 | 93040 | NCCI | Standards of medical / surgical practice |
| G0344 | 93041 | NCCI | Standards of medical / surgical practice |
| G0344 | 93042 | NCCI | Standards of medical / surgical practice |
| G0344 | 95831 | NCCI | Standards of medical / surgical practice |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| G0344 | 95832 | NCCI | Standards of medical / surgical practice |
| G0344 | 95833 | NCCI | Standards of medical / surgical practice |
| G0344 | 95834 | NCCI | Standards of medical / surgical practice |
| G0344 | 95851 | NCCI | Standards of medical / surgical practice |
| G0344 | 95852 | NCCI | Standards of medical / surgical practice |
| G0344 | 96116 | NCCI | HCPCS/CPT coding manual instruction/guideline |
| G0344 | 96150 | NCCI | HCPCS/CPT coding manual instruction / guideline |
| G0344 | 96151 | NCCI | HCPCS/CPT coding manual instruction / guideline |
| G0344 | 96152 | NCCI | HCPCS/CPT coding manual instruction / guideline |
| G0344 | 96153 | NCCI | HCPCS/CPT coding manual instruction / guideline |
| G0344 | 96154 | NCCI | HCPCS/CPT coding manual instruction / guideline |
| G0344 | 97802 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0344 | 97803 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0344 | 97804 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0344 | 99201 | NCCI | Mutually exclusive procedures |
| G0344 | 99202 | NCCI | Mutually exclusive procedures |
| G0344 | 99203 | NCCI | Mutually exclusive procedures |
| G0344 | 99211 | NCCI | Mutually exclusive procedures |
| G0344 | 99212 | NCCI | Mutually exclusive procedures |
| G0344 | 99213 | NCCI | Mutually exclusive procedures |
| G0344 | 99214 | NCCI | Mutually exclusive procedures |
| G0344 | 99241 | NCCI | Mutually exclusive procedures |
| G0344 | 99242 | NCCI | Mutually exclusive procedures |
| G0344 | 99281 | NCCI | Mutually exclusive procedures |
| G0344 | 99282 | NCCI | Mutually exclusive procedures |
| G0344 | 99283 | NCCI | Mutually exclusive procedures |
| G0344 | 99284 | NCCI | Mutually exclusive procedures |
| G0344 | 99304 | NCCI | Mutually exclusive procedure |
| G0344 | 99305 | NCCI | Mutually exclusive procedure |
| G0344 | 99306 | NCCI | Mutually exclusive procedure |
| G0344 | 99307 | NCCI | Mutually exclusive procedure |
| G0344 | 99308 | NCCI | Mutually exclusive procedure |
| G0344 | 99309 | NCCI | Mutually exclusive procedure |
| G0344 | 99310 | NCCI | Mutually exclusive procedure |
| G0344 | 99315 | NCCI | Mutually exclusive procedures |
| G0344 | 99316 | NCCI | Mutually exclusive procedures |
| G0344 | 99318 | NCCI | Mutually exclusive procedure |
| G0344 | 99324 | NCCI | Mutually exclusive procedure |
| G0344 | 99325 | NCCI | Mutually exclusive procedure |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| G0344 | 99326 | NCCI | Mutually exclusive procedure |
| G0344 | 99327 | NCCI | Mutually exclusive procedure |
| G0344 | 99328 | NCCI | Mutually exclusive procedure |
| G0344 | 99334 | NCCI | Mutually exclusive procedure |
| G0344 | 99335 | NCCI | Mutually exclusive procedure |
| G0344 | 99336 | NCCI | Mutually exclusive procedure |
| G0344 | 99337 | NCCI | Mutually exclusive procedure |
| G0344 | 99341 | NCCI | Mutually exclusive procedures |
| G0344 | 99342 | NCCI | Mutually exclusive procedures |
| G0344 | 99347 | NCCI | Mutually exclusive procedures |
| G0344 | 99348 | NCCI | Mutually exclusive procedures |
| G0344 | G0102 | NCCI | Standards of medical / surgical practice |
| G0344 | G0250 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0344 | G0270 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0344 | G0271 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0344 | M0064 | NCCI | Standards of medical / surgical practice |
| G0364 | 01112 | NCCI | Anesthesia included in surgical procedures |
| G0364 | 01120 | NCCI | Anesthesia included in surgical procedures |
| G0365 | 76970 | NCCI | Most extensive procedure |
| G0365 | 76998 | NCCI | Mutually exclusive |
| G0365 | 93922 | NCCI | Most extensive procedure |
| G0365 | 93931 | NCCI | Misuse of Column 2 code with Column 1 code |
| G0365 | 93965 | NCCI | Most extensive procedure |
| G0365 | 93971 | NCCI | Mutually exclusive procedures |
| G0389 | 76998 | NCCI | Misuse of column 2 code with column 1 code |
| G0392 | 01924 | NCCI | Anesthesia included in surgical procedures |
| G0392 | 35206 | NCCI | Misuse of column 2 code with column 1 code |
| G0392 | 35236 | NCCI | Misuse of column 2 code with column 1 code |
| G0392 | 35266 | NCCI | Misuse of column 2 code with column 1 code |
| G0392 | 35458 | NCCI | Mutually Exclusive |
| G0392 | 35475 | NCCI | Mutually Exclusive |
| G0392 | 36000 | NCCI | Standards of medical/surgical practice |
| G0392 | 36002 | NCCI | Misuse of column 2 code with column 1 code |
| G0392 | 36410 | NCCI | Standards of medical/surgical practice |
| G0392 | 36831 | NCCI | Most extensive procedure |
| G0392 | 36860 | NCCI | Misuse of column 2 code with column 1 code |
| G0392 | 36861 | NCCI | Misuse of column 2 code with column 1 code |
| G0392 | 37184 | NCCI | HCPCS/CPT coding manual instruction/guideline |
| G0392 | 37202 | NCCI | Misuse of column 2 code with column 1 code |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0392 | 51701 | NCCI | Standards of medical/surgical practice |
| G0392 | 51702 | NCCI | Standards of medical/surgical practice |
| G0392 | 51703 | NCCI | Standards of medical/surgical practice |
| G0392 | 62318 | NCCI | Misuse of column 2 code with column 1 code |
| G0392 | 62319 | NCCI | Misuse of column 2 code with column 1 code |
| G0392 | 64415 | NCCI | Misuse of column 2 code with column 1 code |
| G0392 | 64416 | NCCI | Misuse of column 2 code with column 1 code |
| G0392 | 64417 | NCCI | Misuse of column 2 code with column 1 code |
| G0392 | 64450 | NCCI | Misuse of column 2 code with column 1 code |
| G0392 | 64470 | NCCI | Misuse of column 2 code with column 1 code |
| G0392 | 64475 | NCCI | Misuse of column 2 code with column 1 code |
| G0392 | 76942 | NCCI | Misuse of column 2 code with column 1 code |
| G0392 | 76998 | NCCI | Misuse of column 2 code with column 1 code |
| G0392 | 77002 | NCCI | Misuse of column 2 code with column 1 code |
| G0392 | 90760 | NCCI | Standards of medical/surgical practice |
| G0392 | 90765 | NCCI | Standards of medical/surgical practice |
| G0392 | 90772 | NCCI | Standards of medical/surgical practice |
| G0392 | 90774 | NCCI | Standards of medical/surgical practice |
| G0392 | 90775 | NCCI | Standards of medical/surgical practice |
| G0392 | 99143 | NCCI | Misuse of column 2 code with column 1 code |
| G0392 | 99144 | NCCI | Misuse of column 2 code with column 1 code |
| G0393 | 01930 | NCCI | Anesthesia included in surgical procedures |
| G0393 | 35206 | NCCI | Misuse of column 2 code with column 1 code |
| G0393 | 35236 | NCCI | Misuse of column 2 code with column 1 code |
| G0393 | 35266 | NCCI | Misuse of column 2 code with column 1 code |
| G0393 | 35460 | NCCI | Mutually Exclusive |
| G0393 | 35476 | NCCI | Mutually Exclusive |
| G0393 | 36000 | NCCI | Standards of medical/surgical practice |
| G0393 | 36002 | NCCI | Misuse of column 2 code with column 1 code |
| G0393 | 36005 | NCCI | Misuse of column 2 code with column 1 code |
| G0393 | 36410 | NCCI | Standards of medical/surgical practice |
| G0393 | 36831 | NCCI | Most extensive procedure |
| G0393 | 36860 | NCCI | Misuse of column 2 code with column 1 code |
| G0393 | 36861 | NCCI | Misuse of column 2 code with column 1 code |
| G0393 | 37202 | NCCI | Misuse of column 2 code with column 1 code |
| G0393 | 51701 | NCCI | Standards of medical/surgical practice |
| G0393 | 51702 | NCCI | Standards of medical/surgical practice |
| G0393 | 51703 | NCCI | Standards of medical/surgical practice |
| G0393 | 62318 | NCCI | Misuse of column 2 code with column 1 code |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| G0393 | 62319 | NCCI | Misuse of column 2 code with column 1 code |
| G0393 | 64415 | NCCI | Misuse of column 2 code with column 1 code |
| G0393 | 64416 | NCCI | Misuse of column 2 code with column 1 code |
| G0393 | 64417 | NCCI | Misuse of column 2 code with column 1 code |
| G0393 | 64450 | NCCI | Misuse of column 2 code with column 1 code |
| G0393 | 64470 | NCCI | Misuse of column 2 code with column 1 code |
| G0393 | 64475 | NCCI | Misuse of column 2 code with column 1 code |
| G0393 | 76942 | NCCI | Misuse of column 2 code with column 1 code |
| G0393 | 76998 | NCCI | Misuse of column 2 code with column 1 code |
| G0393 | 77002 | NCCI | Misuse of column 2 code with column 1 code |
| G0393 | 90760 | NCCI | Standards of medical/surgical practice |
| G0393 | 90765 | NCCI | Standards of medical/surgical practice |
| G0393 | 90772 | NCCI | Standards of medical/surgical practice |
| G0393 | 90774 | NCCI | Standards of medical/surgical practice |
| G0393 | 90775 | NCCI | Standards of medical/surgical practice |
| G0393 | 99143 | NCCI | Misuse of column 2 code with column 1 code |
| G0393 | 99144 | NCCI | Misuse of column 2 code with column 1 code |
| G0394 | 82270 | NCCI | Mutually Exclusive |
| G0394 | 82272 | NCCI | Mutually Exclusive |
| G0394 | 82274 | NCCI | Mutually Exclusive |
| G0394 | G0328 | NCCI | Mutually Exclusive |
| G9001 | G9001 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G9002 | G9002 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G9003 | G9003 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G9004 | G9004 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G9005 | G9005 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G9006 | G9006 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G9007 | G9007 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G9008 | G9008 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G9009 | G9009 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G9010 | G9010 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G9011 | G9011 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|--|
| G9012 | G9012 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| G9016 | G9016 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0001 | H0001 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0002 | H0002 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0003 | H0003 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0004 | H0004 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0005 | H0005 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0006 | H0006 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0007 | H0007 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0008 | H0008 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0009 | H0009 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0010 | H0010 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0011 | H0011 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0012 | H0012 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0013 | H0013 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0014 | H0014 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0015 | H0015 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0016 | H0016 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0017 | H0017 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0018 | H0018 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0019 | H0019 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0020 | H0020 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0021 | H0021 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0022 | H0022 | BCBST | Code redundant to self/should not be reported more than once due to standard description |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| H0023 | H0023 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0024 | H0024 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0025 | H0025 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0026 | H0026 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0027 | H0027 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0028 | H0028 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0029 | H0029 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0030 | H0030 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| H0031 | H0031 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H0032 | H0032 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H0033 | H0033 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H0034 | H0034 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H0035 | H0035 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H0036 | H0036 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H0037 | H0036 | BCBST | This service, supply, or equipment is considered a component of the listed code or represents an alternative service, supply or equipment which is generally redundant to the listed code. |
| H0037 | H0037 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H0038 | H0038 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H0039 | H0039 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H0040 | H0039 | BCBST | This service, supply, or equipment is considered a component of the listed code or represents an alternative service, supply or equipment which is generally redundant to the listed code. |
| H0040 | H0040 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H0041 | H0041 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H0042 | H0041 | BCBST | This service, supply, or equipment is considered a component of the listed code or represents an alternative service, supply or equipment which is generally redundant to the listed code. |
| H0042 | H0042 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|--|
| H0043 | H0043 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H0044 | H0043 | BCBST | This service, supply, or equipment is considered a component of the listed code or represents an alternative service, supply or equipment which is generally redundant to the listed code. |
| H0044 | H0044 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H0045 | H0045 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H0046 | H0046 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H0047 | H0047 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H0048 | H0048 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H1000 | H1000 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H1001 | H1001 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H1002 | H1002 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H1003 | H1003 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H1004 | H1004 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H1005 | H1001 | BCBST | The edited code is considered an integral component of the listed code as per the descriptor of the listed code. |
| H1005 | H1002 | BCBST | The edited code is considered an integral component of the listed code as per the descriptor of the listed code. |
| H1005 | H1003 | BCBST | The edited code is considered an integral component of the listed code as per the descriptor of the listed code. |
| H1005 | H1004 | BCBST | The edited code is considered an integral component of the listed code as per the descriptor of the listed code. |
| H1005 | H1005 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H1010 | H1010 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H1011 | H1011 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H2000 | H2000 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| H2001 | H2001 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| J0850 | J0850 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1460 | J1460 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1460 | J1470 | BCBST | Code redundant to self/should not be reported more than once due to standard description |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| J1460 | J1480 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1460 | J1490 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1460 | J1500 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1460 | J1510 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1460 | J1520 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1460 | J1530 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1460 | J1540 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1460 | J1550 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1460 | J1560 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1470 | J1460 | NCCI | NCCI Most extensive procedures |
| J1470 | J1470 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1470 | J1480 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1470 | J1490 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1470 | J1500 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1470 | J1510 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1470 | J1520 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1470 | J1530 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1470 | J1540 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1470 | J1550 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1470 | J1560 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1480 | J1460 | NCCI | NCCI Most extensive procedures |
| J1480 | J1470 | NCCI | NCCI Most extensive procedures |
| J1480 | J1480 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1480 | J1490 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1480 | J1500 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1480 | J1510 | BCBST | Code redundant to self/should not be reported more than once due to standard description |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| J1480 | J1520 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1480 | J1530 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1480 | J1540 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1480 | J1550 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1480 | J1560 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1490 | J1460 | NCCI | NCCI Most extensive procedures |
| J1490 | J1470 | NCCI | NCCI Most extensive procedures |
| J1490 | J1480 | NCCI | NCCI Most extensive procedures |
| J1490 | J1490 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1490 | J1500 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1490 | J1510 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1490 | J1520 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1490 | J1530 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1490 | J1540 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1490 | J1550 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1490 | J1560 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1500 | J1460 | NCCI | NCCI Most extensive procedures |
| J1500 | J1470 | NCCI | NCCI Most extensive procedures |
| J1500 | J1480 | NCCI | NCCI Most extensive procedures |
| J1500 | J1490 | NCCI | NCCI Most extensive procedures |
| J1500 | J1500 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1500 | J1510 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1500 | J1520 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1500 | J1530 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1500 | J1540 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1500 | J1550 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1500 | J1560 | BCBST | Code redundant to self/should not be reported more than once due to standard description |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| J1510 | J1460 | NCCI | NCCI Most extensive procedures |
| J1510 | J1470 | NCCI | NCCI Most extensive procedures |
| J1510 | J1480 | NCCI | NCCI Most extensive procedures |
| J1510 | J1490 | NCCI | NCCI Most extensive procedures |
| J1510 | J1500 | NCCI | NCCI Most extensive procedures |
| J1510 | J1510 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1510 | J1520 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1510 | J1530 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1510 | J1540 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1510 | J1550 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1510 | J1560 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1520 | J1460 | NCCI | NCCI Most extensive procedures |
| J1520 | J1470 | NCCI | NCCI Most extensive procedures |
| J1520 | J1480 | NCCI | NCCI Most extensive procedures |
| J1520 | J1490 | NCCI | NCCI Most extensive procedures |
| J1520 | J1500 | NCCI | NCCI Most extensive procedures |
| J1520 | J1510 | NCCI | NCCI Most extensive procedures |
| J1520 | J1520 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1520 | J1530 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1520 | J1540 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1520 | J1550 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1520 | J1560 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1530 | J1460 | NCCI | NCCI Most extensive procedures |
| J1530 | J1470 | NCCI | NCCI Most extensive procedures |
| J1530 | J1480 | NCCI | NCCI Most extensive procedures |
| J1530 | J1490 | NCCI | NCCI Most extensive procedures |
| J1530 | J1500 | NCCI | NCCI Most extensive procedures |
| J1530 | J1510 | NCCI | NCCI Most extensive procedures |
| J1530 | J1520 | NCCI | NCCI Most extensive procedures |
| J1530 | J1530 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1530 | J1540 | BCBST | Code redundant to self/should not be reported more than once due to standard description |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| J1530 | J1550 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1530 | J1560 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1540 | J1460 | NCCI | NCCI Most extensive procedures |
| J1540 | J1470 | NCCI | NCCI Most extensive procedures |
| J1540 | J1480 | NCCI | NCCI Most extensive procedures |
| J1540 | J1490 | NCCI | NCCI Most extensive procedures |
| J1540 | J1500 | NCCI | NCCI Most extensive procedures |
| J1540 | J1510 | NCCI | NCCI Most extensive procedures |
| J1540 | J1520 | NCCI | NCCI Most extensive procedures |
| J1540 | J1530 | NCCI | NCCI Most extensive procedures |
| J1540 | J1540 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1540 | J1550 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1540 | J1560 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1550 | J1460 | NCCI | NCCI Most extensive procedures |
| J1550 | J1470 | NCCI | NCCI Most extensive procedures |
| J1550 | J1480 | NCCI | NCCI Most extensive procedures |
| J1550 | J1490 | NCCI | NCCI Most extensive procedures |
| J1550 | J1500 | NCCI | NCCI Most extensive procedures |
| J1550 | J1510 | NCCI | NCCI Most extensive procedures |
| J1550 | J1520 | NCCI | NCCI Most extensive procedures |
| J1550 | J1530 | NCCI | NCCI Most extensive procedures |
| J1550 | J1540 | NCCI | NCCI Most extensive procedures |
| J1550 | J1550 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1550 | J1560 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1560 | J1460 | NCCI | NCCI Most extensive procedures |
| J1560 | J1470 | NCCI | NCCI Most extensive procedures |
| J1560 | J1480 | NCCI | NCCI Most extensive procedures |
| J1560 | J1490 | NCCI | NCCI Most extensive procedures |
| J1560 | J1500 | NCCI | NCCI Most extensive procedures |
| J1560 | J1510 | NCCI | NCCI Most extensive procedures |
| J1560 | J1520 | NCCI | NCCI Most extensive procedures |
| J1560 | J1530 | NCCI | NCCI Most extensive procedures |
| J1560 | J1540 | NCCI | NCCI Most extensive procedures |
| J1560 | J1550 | NCCI | NCCI Most extensive procedures |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| J1560 | J1560 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1561 | J1561 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1562 | J1562 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1563 | 90283 | BCBST | This HCPCS code represents essentially the same or very similar immune globulin product as the listed CPT code. |
| J1564 | 90283 | BCBST | This code combination represents an incompatible linkage with conflicting, overlapping, or mutually exclusive elements. |
| J1565 | 90378 | NCCI | NCCI Mutually exclusive procedures |
| J1565 | J1565 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1566 | J1566 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1568 | J1568 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1569 | J1569 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1571 | J1571 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1572 | J1572 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1573 | J1573 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J1670 | J1670 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J2788 | 90384 | BCBST | This code combination represents an incompatible linkage with conflicting, overlapping, or mutually exclusive elements. |
| J2788 | 90385 | BCBST | This code combination represents an incompatible linkage with conflicting, overlapping, or mutually exclusive elements. |
| J2788 | J2788 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J2788 | J2788 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| J2788 | J2792 | BCBST | The edited code is incompatible with the listed code in that it describes an alternative supply that is exclusive of the listed procedure. |
| J2790 | 90385 | NCCI | NCCI Most extensive procedures |
| J2790 | 90385 | NCCI | NCCI Refer to Specific Guidelines |
| J2790 | J2788 | CPT | Edited mini dose and listed full dose would not be administered on same DOS. |
| J2790 | J2788 | BCBST | This HCPCS code represents essentially the same or very similar immune globulin product as the listed CPT code. |
| J2790 | J2790 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J2790 | J2790 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J2790 | J2792 | NCCI | NCCI Refer to Specific Guidelines |
| J2790 | J2792 | NCCI | NCCI Mutually exclusive procedures |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| J2791 | J2791 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J2792 | 90385 | NCCI | NCCI Refer to Specific Guidelines |
| J2792 | 90385 | NCCI | NCCI Most extensive procedures |
| J2792 | J2792 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J7504 | J7504 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J7511 | J7511 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| J9031 | J9031 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| K0001 | E0967 | BCBST | Edited code is a component of the listed code |
| K0001 | E0981 | BCBST | Edited code is a component of the listed code |
| K0001 | E0982 | BCBST | Edited code is a component of the listed code |
| K0001 | E0995 | BCBST | Edited code is a component of the listed code |
| K0001 | E2205 | BCBST | Edited code is a component of the listed code |
| K0001 | E2206 | BCBST | Edited code is a component of the listed code |
| K0001 | E2210 | BCBST | Edited code is a component of the listed code |
| K0001 | E2220 | BCBST | Edited code is a component of the listed code |
| K0001 | E2221 | BCBST | Edited code is a component of the listed code |
| K0001 | E2222 | BCBST | Edited code is a component of the listed code |
| K0001 | E2223 | BCBST | Edited code is a component of the listed code |
| K0001 | E2224 | BCBST | Edited code is a component of the listed code |
| K0001 | E2225 | BCBST | Edited code is a component of the listed code |
| K0001 | E2226 | BCBST | Edited code is a component of the listed code |
| K0001 | K0001 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0001 | K0002 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0001 | K0003 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0001 | K0004 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0001 | K0005 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0001 | K0006 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0001 | K0007 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0001 | K0009 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0001 | K0010 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0001 | K0011 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0001 | K0012 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0001 | K0014 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0001 | K0015 | BCBST | Edited code is a component of the listed code |
| K0001 | K0017 | BCBST | Edited code is a component of the listed code |
| K0001 | K0018 | BCBST | Edited code is a component of the listed code |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| K0001 | K0019 | BCBST | Edited code is a component of the listed code |
| K0001 | K0042 | BCBST | Edited code is a component of the listed code |
| K0001 | K0043 | BCBST | Edited code is a component of the listed code |
| K0001 | K0044 | BCBST | Edited code is a component of the listed code |
| K0001 | K0045 | BCBST | Edited code is a component of the listed code |
| K0001 | K0046 | BCBST | Edited code is a component of the listed code |
| K0001 | K0047 | BCBST | Edited code is a component of the listed code |
| K0001 | K0050 | BCBST | Edited code is a component of the listed code |
| K0001 | K0052 | BCBST | Edited code is a component of the listed code |
| K0001 | K0069 | BCBST | Edited code is a component of the listed code |
| K0001 | K0070 | BCBST | Edited code is a component of the listed code |
| K0001 | K0071 | BCBST | Edited code is a component of the listed code |
| K0001 | K0072 | BCBST | Edited code is a component of the listed code |
| K0002 | E0967 | BCBST | Edited code is a component of the listed code |
| K0002 | E0981 | BCBST | Edited code is a component of the listed code |
| K0002 | E0982 | BCBST | Edited code is a component of the listed code |
| K0002 | E0995 | BCBST | Edited code is a component of the listed code |
| K0002 | E2205 | BCBST | Edited code is a component of the listed code |
| K0002 | E2206 | BCBST | Edited code is a component of the listed code |
| K0002 | E2210 | BCBST | Edited code is a component of the listed code |
| K0002 | E2220 | BCBST | Edited code is a component of the listed code |
| K0002 | E2221 | BCBST | Edited code is a component of the listed code |
| K0002 | E2222 | BCBST | Edited code is a component of the listed code |
| K0002 | E2223 | BCBST | Edited code is a component of the listed code |
| K0002 | E2224 | BCBST | Edited code is a component of the listed code |
| K0002 | E2225 | BCBST | Edited code is a component of the listed code |
| K0002 | E2226 | BCBST | Edited code is a component of the listed code |
| K0002 | K0002 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0002 | K0003 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0002 | K0004 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0002 | K0005 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0002 | K0006 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0002 | K0007 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0002 | K0009 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0002 | K0010 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0002 | K0011 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0002 | K0012 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0002 | K0014 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|--|
| K0002 | K0015 | BCBST | Edited code is a component of the listed code |
| K0002 | K0017 | BCBST | Edited code is a component of the listed code |
| K0002 | K0018 | BCBST | Edited code is a component of the listed code |
| K0002 | K0019 | BCBST | Edited code is a component of the listed code |
| K0002 | K0042 | BCBST | Edited code is a component of the listed code |
| K0002 | K0043 | BCBST | Edited code is a component of the listed code |
| K0002 | K0044 | BCBST | Edited code is a component of the listed code |
| K0002 | K0045 | BCBST | Edited code is a component of the listed code |
| K0002 | K0046 | BCBST | Edited code is a component of the listed code |
| K0002 | K0047 | BCBST | Edited code is a component of the listed code |
| K0002 | K0050 | BCBST | Edited code is a component of the listed code |
| K0002 | K0052 | BCBST | Edited code is a component of the listed code |
| K0002 | K0069 | BCBST | Edited code is a component of the listed code |
| K0002 | K0070 | BCBST | Edited code is a component of the listed code |
| K0002 | K0071 | BCBST | Edited code is a component of the listed code |
| K0002 | K0072 | BCBST | Edited code is a component of the listed code |
| K0003 | E0967 | BCBST | Edited code is a component of the listed code |
| K0003 | E0981 | BCBST | Edited code is a component of the listed code |
| K0003 | E0982 | BCBST | Edited code is a component of the listed code |
| K0003 | E0995 | BCBST | Edited code is a component of the listed code |
| K0003 | E2205 | BCBST | Edited code is a component of the listed code |
| K0003 | E2206 | BCBST | Edited code is a component of the listed code |
| K0003 | E2210 | BCBST | Edited code is a component of the listed code |
| K0003 | E2220 | BCBST | Edited code is a component of the listed code |
| K0003 | E2221 | BCBST | Edited code is a component of the listed code |
| K0003 | E2222 | BCBST | Edited code is a component of the listed code |
| K0003 | E2223 | BCBST | Edited code is a component of the listed code |
| K0003 | E2224 | BCBST | Edited code is a component of the listed code |
| K0003 | E2225 | BCBST | Edited code is a component of the listed code |
| K0003 | E2226 | BCBST | Edited code is a component of the listed code |
| K0003 | K0003 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0003 | K0004 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0003 | K0005 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0003 | K0006 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0003 | K0007 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0003 | K0009 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0003 | K0010 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0003 | K0011 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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Print Date: 08/11/2008

BlueCross BlueShield of Tennessee-Coding Bundling Rules

Source: PNC-CARR

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| K0003 | K0012 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0003 | K0014 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0003 | K0015 | BCBST | Edited code is a component of the listed code |
| K0003 | K0017 | BCBST | Edited code is a component of the listed code |
| K0003 | K0018 | BCBST | Edited code is a component of the listed code |
| K0003 | K0019 | BCBST | Edited code is a component of the listed code |
| K0003 | K0042 | BCBST | Edited code is a component of the listed code |
| K0003 | K0043 | BCBST | Edited code is a component of the listed code |
| K0003 | K0044 | BCBST | Edited code is a component of the listed code |
| K0003 | K0045 | BCBST | Edited code is a component of the listed code |
| K0003 | K0046 | BCBST | Edited code is a component of the listed code |
| K0003 | K0047 | BCBST | Edited code is a component of the listed code |
| K0003 | K0050 | BCBST | Edited code is a component of the listed code |
| K0003 | K0052 | BCBST | Edited code is a component of the listed code |
| K0003 | K0069 | BCBST | Edited code is a component of the listed code |
| K0003 | K0070 | BCBST | Edited code is a component of the listed code |
| K0003 | K0071 | BCBST | Edited code is a component of the listed code |
| K0003 | K0072 | BCBST | Edited code is a component of the listed code |
| K0004 | E0967 | BCBST | Edited code is a component of the listed code |
| K0004 | E0981 | BCBST | Edited code is a component of the listed code |
| K0004 | E0982 | BCBST | Edited code is a component of the listed code |
| K0004 | E0995 | BCBST | Edited code is a component of the listed code |
| K0004 | E2205 | BCBST | Edited code is a component of the listed code |
| K0004 | E2206 | BCBST | Edited code is a component of the listed code |
| K0004 | E2210 | BCBST | Edited code is a component of the listed code |
| K0004 | E2220 | BCBST | Edited code is a component of the listed code |
| K0004 | E2221 | BCBST | Edited code is a component of the listed code |
| K0004 | E2222 | BCBST | Edited code is a component of the listed code |
| K0004 | E2223 | BCBST | Edited code is a component of the listed code |
| K0004 | E2224 | BCBST | Edited code is a component of the listed code |
| K0004 | E2225 | BCBST | Edited code is a component of the listed code |
| K0004 | E2226 | BCBST | Edited code is a component of the listed code |
| K0004 | K0004 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0004 | K0005 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0004 | K0006 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0004 | K0007 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0004 | K0009 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0004 | K0010 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| K0004 | K0011 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0004 | K0012 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0004 | K0014 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0004 | K0015 | BCBST | Edited code is a component of the listed code |
| K0004 | K0017 | BCBST | Edited code is a component of the listed code |
| K0004 | K0018 | BCBST | Edited code is a component of the listed code |
| K0004 | K0019 | BCBST | Edited code is a component of the listed code |
| K0004 | K0042 | BCBST | Edited code is a component of the listed code |
| K0004 | K0043 | BCBST | Edited code is a component of the listed code |
| K0004 | K0044 | BCBST | Edited code is a component of the listed code |
| K0004 | K0045 | BCBST | Edited code is a component of the listed code |
| K0004 | K0046 | BCBST | Edited code is a component of the listed code |
| K0004 | K0047 | BCBST | Edited code is a component of the listed code |
| K0004 | K0050 | BCBST | Edited code is a component of the listed code |
| K0004 | K0052 | BCBST | Edited code is a component of the listed code |
| K0004 | K0069 | BCBST | Edited code is a component of the listed code |
| K0004 | K0070 | BCBST | Edited code is a component of the listed code |
| K0004 | K0071 | BCBST | Edited code is a component of the listed code |
| K0004 | K0072 | BCBST | Edited code is a component of the listed code |
| K0005 | E0967 | BCBST | Edited code is a component of the listed code |
| K0005 | E0981 | BCBST | Edited code is a component of the listed code |
| K0005 | E0982 | BCBST | Edited code is a component of the listed code |
| K0005 | E0995 | BCBST | Edited code is a component of the listed code |
| K0005 | E2205 | BCBST | Edited code is a component of the listed code |
| K0005 | E2206 | BCBST | Edited code is a component of the listed code |
| K0005 | E2210 | BCBST | Edited code is a component of the listed code |
| K0005 | E2220 | BCBST | Edited code is a component of the listed code |
| K0005 | E2221 | BCBST | Edited code is a component of the listed code |
| K0005 | E2222 | BCBST | Edited code is a component of the listed code |
| K0005 | E2223 | BCBST | Edited code is a component of the listed code |
| K0005 | E2224 | BCBST | Edited code is a component of the listed code |
| K0005 | E2225 | BCBST | Edited code is a component of the listed code |
| K0005 | E2226 | BCBST | Edited code is a component of the listed code |
| K0005 | K0005 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0005 | K0006 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0005 | K0007 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0005 | K0009 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0005 | K0010 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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Print Date: 08/11/2008

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Source: PNC-CARR

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| K0005 | K0011 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0005 | K0012 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0005 | K0014 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0005 | K0015 | BCBST | Edited code is a component of the listed code |
| K0005 | K0017 | BCBST | Edited code is a component of the listed code |
| K0005 | K0018 | BCBST | Edited code is a component of the listed code |
| K0005 | K0019 | BCBST | Edited code is a component of the listed code |
| K0005 | K0042 | BCBST | Edited code is a component of the listed code |
| K0005 | K0043 | BCBST | Edited code is a component of the listed code |
| K0005 | K0044 | BCBST | Edited code is a component of the listed code |
| K0005 | K0045 | BCBST | Edited code is a component of the listed code |
| K0005 | K0046 | BCBST | Edited code is a component of the listed code |
| K0005 | K0047 | BCBST | Edited code is a component of the listed code |
| K0005 | K0050 | BCBST | Edited code is a component of the listed code |
| K0005 | K0052 | BCBST | Edited code is a component of the listed code |
| K0005 | K0069 | BCBST | Edited code is a component of the listed code |
| K0005 | K0070 | BCBST | Edited code is a component of the listed code |
| K0005 | K0071 | BCBST | Edited code is a component of the listed code |
| K0005 | K0072 | BCBST | Edited code is a component of the listed code |
| K0006 | E0967 | BCBST | Edited code is a component of the listed code |
| K0006 | E0981 | BCBST | Edited code is a component of the listed code |
| K0006 | E0982 | BCBST | Edited code is a component of the listed code |
| K0006 | E0995 | BCBST | Edited code is a component of the listed code |
| K0006 | E2205 | BCBST | Edited code is a component of the listed code |
| K0006 | E2206 | BCBST | Edited code is a component of the listed code |
| K0006 | E2210 | BCBST | Edited code is a component of the listed code |
| K0006 | E2220 | BCBST | Edited code is a component of the listed code |
| K0006 | E2221 | BCBST | Edited code is a component of the listed code |
| K0006 | E2222 | BCBST | Edited code is a component of the listed code |
| K0006 | E2223 | BCBST | Edited code is a component of the listed code |
| K0006 | E2224 | BCBST | Edited code is a component of the listed code |
| K0006 | E2225 | BCBST | Edited code is a component of the listed code |
| K0006 | E2226 | BCBST | Edited code is a component of the listed code |
| K0006 | K0006 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0006 | K0007 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0006 | K0009 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0006 | K0010 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0006 | K0011 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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Print Date: 08/11/2008

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Source: PNC-CARR

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| K0006 | K0012 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0006 | K0014 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0006 | K0015 | BCBST | Edited code is a component of the listed code |
| K0006 | K0017 | BCBST | Edited code is a component of the listed code |
| K0006 | K0018 | BCBST | Edited code is a component of the listed code |
| K0006 | K0019 | BCBST | Edited code is a component of the listed code |
| K0006 | K0042 | BCBST | Edited code is a component of the listed code |
| K0006 | K0043 | BCBST | Edited code is a component of the listed code |
| K0006 | K0044 | BCBST | Edited code is a component of the listed code |
| K0006 | K0045 | BCBST | Edited code is a component of the listed code |
| K0006 | K0046 | BCBST | Edited code is a component of the listed code |
| K0006 | K0047 | BCBST | Edited code is a component of the listed code |
| K0006 | K0050 | BCBST | Edited code is a component of the listed code |
| K0006 | K0052 | BCBST | Edited code is a component of the listed code |
| K0006 | K0069 | BCBST | Edited code is a component of the listed code |
| K0006 | K0070 | BCBST | Edited code is a component of the listed code |
| K0006 | K0071 | BCBST | Edited code is a component of the listed code |
| K0006 | K0072 | BCBST | Edited code is a component of the listed code |
| K0007 | E0967 | BCBST | Edited code is a component of the listed code |
| K0007 | E0981 | BCBST | Edited code is a component of the listed code |
| K0007 | E0982 | BCBST | Edited code is a component of the listed code |
| K0007 | E0995 | BCBST | Edited code is a component of the listed code |
| K0007 | E2205 | BCBST | Edited code is a component of the listed code |
| K0007 | E2206 | BCBST | Edited code is a component of the listed code |
| K0007 | E2210 | BCBST | Edited code is a component of the listed code |
| K0007 | E2220 | BCBST | Edited code is a component of the listed code |
| K0007 | E2221 | BCBST | Edited code is a component of the listed code |
| K0007 | E2222 | BCBST | Edited code is a component of the listed code |
| K0007 | E2223 | BCBST | Edited code is a component of the listed code |
| K0007 | E2224 | BCBST | Edited code is a component of the listed code |
| K0007 | E2225 | BCBST | Edited code is a component of the listed code |
| K0007 | E2226 | BCBST | Edited code is a component of the listed code |
| K0007 | K0007 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0007 | K0009 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0007 | K0010 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0007 | K0011 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0007 | K0012 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0007 | K0014 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| K0007 | K0015 | BCBST | Edited code is a component of the listed code |
| K0007 | K0017 | BCBST | Edited code is a component of the listed code |
| K0007 | K0018 | BCBST | Edited code is a component of the listed code |
| K0007 | K0019 | BCBST | Edited code is a component of the listed code |
| K0007 | K0042 | BCBST | Edited code is a component of the listed code |
| K0007 | K0043 | BCBST | Edited code is a component of the listed code |
| K0007 | K0044 | BCBST | Edited code is a component of the listed code |
| K0007 | K0045 | BCBST | Edited code is a component of the listed code |
| K0007 | K0046 | BCBST | Edited code is a component of the listed code |
| K0007 | K0047 | BCBST | Edited code is a component of the listed code |
| K0007 | K0050 | BCBST | Edited code is a component of the listed code |
| K0007 | K0052 | BCBST | Edited code is a component of the listed code |
| K0007 | K0069 | BCBST | Edited code is a component of the listed code |
| K0007 | K0070 | BCBST | Edited code is a component of the listed code |
| K0007 | K0071 | BCBST | Edited code is a component of the listed code |
| K0007 | K0072 | BCBST | Edited code is a component of the listed code |
| K0009 | E0967 | BCBST | Edited code is a component of the listed code |
| K0009 | E0981 | BCBST | Edited code is a component of the listed code |
| K0009 | E0982 | BCBST | Edited code is a component of the listed code |
| K0009 | E0995 | BCBST | Edited code is a component of the listed code |
| K0009 | E2205 | BCBST | Edited code is a component of the listed code |
| K0009 | E2206 | BCBST | Edited code is a component of the listed code |
| K0009 | E2210 | BCBST | Edited code is a component of the listed code |
| K0009 | E2220 | BCBST | Edited code is a component of the listed code |
| K0009 | E2221 | BCBST | Edited code is a component of the listed code |
| K0009 | E2222 | BCBST | Edited code is a component of the listed code |
| K0009 | E2223 | BCBST | Edited code is a component of the listed code |
| K0009 | E2224 | BCBST | Edited code is a component of the listed code |
| K0009 | E2225 | BCBST | Edited code is a component of the listed code |
| K0009 | E2226 | BCBST | Edited code is a component of the listed code |
| K0009 | K0009 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0009 | K0010 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0009 | K0011 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0009 | K0012 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0009 | K0014 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0009 | K0015 | BCBST | Edited code is a component of the listed code |
| K0009 | K0017 | BCBST | Edited code is a component of the listed code |
| K0009 | K0018 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| K0009 | K0019 | BCBST | Edited code is a component of the listed code |
| K0009 | K0042 | BCBST | Edited code is a component of the listed code |
| K0009 | K0043 | BCBST | Edited code is a component of the listed code |
| K0009 | K0044 | BCBST | Edited code is a component of the listed code |
| K0009 | K0045 | BCBST | Edited code is a component of the listed code |
| K0009 | K0046 | BCBST | Edited code is a component of the listed code |
| K0009 | K0047 | BCBST | Edited code is a component of the listed code |
| K0009 | K0050 | BCBST | Edited code is a component of the listed code |
| K0009 | K0052 | BCBST | Edited code is a component of the listed code |
| K0009 | K0069 | BCBST | Edited code is a component of the listed code |
| K0009 | K0070 | BCBST | Edited code is a component of the listed code |
| K0009 | K0071 | BCBST | Edited code is a component of the listed code |
| K0009 | K0072 | BCBST | Edited code is a component of the listed code |
| K0010 | K0010 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0010 | K0011 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0010 | K0012 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0010 | K0014 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0011 | K0011 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0011 | K0012 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0011 | K0014 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0012 | K0012 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0012 | K0014 | BCBST | The edited wheelchair code is considered redundant to the listed wheelchair code. |
| K0014 | K0014 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0016 | K0018 | BCBST | The edited code is a component of the listed code. |
| K0020 | K0020 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0025 | K0025 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0028 | K0028 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0029 | K0029 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0030 | K0030 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0045 | K0043 | BCBST | The edited code is a component of the listed code. Code K0043 and code K0044 rebundle to code K0045. |
| K0045 | K0044 | BCBST | The edited code is a component of the listed code. |
| K0045 | K0045 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| K0050 | K0050 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0056 | K0056 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0066 | K0067 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| K0066 | K0068 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| K0069 | K0066 | BCBST | The edited code is considered an integral component of the listed code. |
| K0070 | K0067 | BCBST | The edited code is considered an integral component of the listed code. |
| K0070 | K0068 | BCBST | The edited code is considered an integral component of the listed code. |
| K0071 | K0074 | BCBST | The edited code is considered an integral component of the listed code. |
| K0071 | K0075 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| K0071 | K0076 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| K0072 | K0074 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| K0072 | K0075 | BCBST | The edited code is considered an integral component of the listed code. |
| K0072 | K0076 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| K0088 | K0088 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0089 | K0088 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| K0089 | K0089 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0098 | K0098 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0100 | K0100 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0102 | K0102 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0103 | K0103 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0107 | K0107 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0108 | K0108 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0112 | K0112 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0112 | K0113 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| K0113 | K0113 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0195 | K0195 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| K0268 | K0268 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0452 | K0452 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0455 | K0455 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0460 | K0460 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0461 | K0460 | BCBST | The listed and edited codes are mutually exclusive. |
| K0461 | K0461 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0462 | K0462 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0532 | K0532 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0533 | K0532 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| K0533 | K0533 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0534 | K0532 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| K0534 | K0533 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| K0534 | K0534 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0538 | K0538 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0541 | K0541 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0542 | K0541 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| K0542 | K0542 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0543 | K0541 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| K0543 | K0542 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| K0543 | K0543 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0544 | K0541 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| K0544 | K0542 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| K0544 | K0543 | BCBST | The listed and edited codes are mutually exclusive devices. One or the other, but not both, would typically be required for a patient. |
| K0544 | K0544 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0545 | K0545 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| K0546 | K0546 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0547 | K0547 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0556 | K0556 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0557 | K0557 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0558 | K0558 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0559 | K0559 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| K0813 | E0971 | BCBST | Edited code is a component of the listed code |
| K0813 | E0978 | BCBST | Edited code is a component of the listed code |
| K0813 | E0981 | BCBST | Edited code is a component of the listed code |
| K0813 | E0982 | BCBST | Edited code is a component of the listed code |
| K0813 | E0995 | BCBST | Edited code is a component of the listed code |
| K0813 | E1225 | BCBST | Edited code is a component of the listed code |
| K0813 | E2357 | BCBST | Edited code is a component of the listed code |
| K0813 | E2366 | BCBST | Edited code is a component of the listed code |
| K0813 | E2368 | BCBST | Edited code is a component of the listed code |
| K0813 | E2369 | BCBST | Edited code is a component of the listed code |
| K0813 | E2370 | BCBST | Edited code is a component of the listed code |
| K0813 | E2374 | BCBST | Edited code is a component of the listed code |
| K0813 | E2375 | BCBST | Edited code is a component of the listed code |
| K0813 | E2376 | BCBST | Edited code is a component of the listed code |
| K0813 | E2381 | BCBST | Edited code is a component of the listed code |
| K0813 | E2382 | BCBST | Edited code is a component of the listed code |
| K0813 | E2383 | BCBST | Edited code is a component of the listed code |
| K0813 | E2384 | BCBST | Edited code is a component of the listed code |
| K0813 | E2385 | BCBST | Edited code is a component of the listed code |
| K0813 | E2386 | BCBST | Edited code is a component of the listed code |
| K0813 | E2387 | BCBST | Edited code is a component of the listed code |
| K0813 | E2388 | BCBST | Edited code is a component of the listed code |
| K0813 | E2389 | BCBST | Edited code is a component of the listed code |
| K0813 | E2390 | BCBST | Edited code is a component of the listed code |
| K0813 | E2391 | BCBST | Edited code is a component of the listed code |
| K0813 | E2392 | BCBST | Edited code is a component of the listed code |
| K0813 | E2393 | BCBST | Edited code is a component of the listed code |
| K0813 | E2394 | BCBST | Edited code is a component of the listed code |
| K0813 | E2395 | BCBST | Edited code is a component of the listed code |
| K0813 | E2396 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0813 | K0015 | BCBST | Edited code is a component of the listed code |
| K0813 | K0017 | BCBST | Edited code is a component of the listed code |
| K0813 | K0018 | BCBST | Edited code is a component of the listed code |
| K0813 | K0019 | BCBST | Edited code is a component of the listed code |
| K0813 | K0020 | BCBST | Edited code is a component of the listed code |
| K0813 | K0037 | BCBST | Edited code is a component of the listed code |
| K0813 | K0040 | BCBST | Edited code is a component of the listed code |
| K0813 | K0041 | BCBST | Edited code is a component of the listed code |
| K0813 | K0042 | BCBST | Edited code is a component of the listed code |
| K0813 | K0043 | BCBST | Edited code is a component of the listed code |
| K0813 | K0044 | BCBST | Edited code is a component of the listed code |
| K0813 | K0045 | BCBST | Edited code is a component of the listed code |
| K0813 | K0046 | BCBST | Edited code is a component of the listed code |
| K0813 | K0047 | BCBST | Edited code is a component of the listed code |
| K0813 | K0051 | BCBST | Edited code is a component of the listed code |
| K0813 | K0052 | BCBST | Edited code is a component of the listed code |
| K0813 | K0098 | BCBST | Edited code is a component of the listed code |
| K0814 | E0971 | BCBST | Edited code is a component of the listed code |
| K0814 | E0978 | BCBST | Edited code is a component of the listed code |
| K0814 | E0981 | BCBST | Edited code is a component of the listed code |
| K0814 | E0982 | BCBST | Edited code is a component of the listed code |
| K0814 | E0995 | BCBST | Edited code is a component of the listed code |
| K0814 | E1225 | BCBST | Edited code is a component of the listed code |
| K0814 | E2357 | BCBST | Edited code is a component of the listed code |
| K0814 | E2366 | BCBST | Edited code is a component of the listed code |
| K0814 | E2368 | BCBST | Edited code is a component of the listed code |
| K0814 | E2369 | BCBST | Edited code is a component of the listed code |
| K0814 | E2370 | BCBST | Edited code is a component of the listed code |
| K0814 | E2374 | BCBST | Edited code is a component of the listed code |
| K0814 | E2375 | BCBST | Edited code is a component of the listed code |
| K0814 | E2376 | BCBST | Edited code is a component of the listed code |
| K0814 | E2381 | BCBST | Edited code is a component of the listed code |
| K0814 | E2382 | BCBST | Edited code is a component of the listed code |
| K0814 | E2383 | BCBST | Edited code is a component of the listed code |
| K0814 | E2384 | BCBST | Edited code is a component of the listed code |
| K0814 | E2385 | BCBST | Edited code is a component of the listed code |
| K0814 | E2386 | BCBST | Edited code is a component of the listed code |
| K0814 | E2387 | BCBST | Edited code is a component of the listed code |
| K0814 | E2388 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0814 | E2389 | BCBST | Edited code is a component of the listed code |
| K0814 | E2390 | BCBST | Edited code is a component of the listed code |
| K0814 | E2391 | BCBST | Edited code is a component of the listed code |
| K0814 | E2392 | BCBST | Edited code is a component of the listed code |
| K0814 | E2393 | BCBST | Edited code is a component of the listed code |
| K0814 | E2394 | BCBST | Edited code is a component of the listed code |
| K0814 | E2395 | BCBST | Edited code is a component of the listed code |
| K0814 | E2396 | BCBST | Edited code is a component of the listed code |
| K0814 | K0015 | BCBST | Edited code is a component of the listed code |
| K0814 | K0017 | BCBST | Edited code is a component of the listed code |
| K0814 | K0018 | BCBST | Edited code is a component of the listed code |
| K0814 | K0019 | BCBST | Edited code is a component of the listed code |
| K0814 | K0020 | BCBST | Edited code is a component of the listed code |
| K0814 | K0037 | BCBST | Edited code is a component of the listed code |
| K0814 | K0040 | BCBST | Edited code is a component of the listed code |
| K0814 | K0041 | BCBST | Edited code is a component of the listed code |
| K0814 | K0042 | BCBST | Edited code is a component of the listed code |
| K0814 | K0043 | BCBST | Edited code is a component of the listed code |
| K0814 | K0044 | BCBST | Edited code is a component of the listed code |
| K0814 | K0045 | BCBST | Edited code is a component of the listed code |
| K0814 | K0046 | BCBST | Edited code is a component of the listed code |
| K0814 | K0047 | BCBST | Edited code is a component of the listed code |
| K0814 | K0051 | BCBST | Edited code is a component of the listed code |
| K0814 | K0052 | BCBST | Edited code is a component of the listed code |
| K0814 | K0098 | BCBST | Edited code is a component of the listed code |
| K0815 | E0971 | BCBST | Edited code is a component of the listed code |
| K0815 | E0978 | BCBST | Edited code is a component of the listed code |
| K0815 | E0981 | BCBST | Edited code is a component of the listed code |
| K0815 | E0982 | BCBST | Edited code is a component of the listed code |
| K0815 | E0995 | BCBST | Edited code is a component of the listed code |
| K0815 | E1225 | BCBST | Edited code is a component of the listed code |
| K0815 | E2357 | BCBST | Edited code is a component of the listed code |
| K0815 | E2366 | BCBST | Edited code is a component of the listed code |
| K0815 | E2368 | BCBST | Edited code is a component of the listed code |
| K0815 | E2369 | BCBST | Edited code is a component of the listed code |
| K0815 | E2370 | BCBST | Edited code is a component of the listed code |
| K0815 | E2374 | BCBST | Edited code is a component of the listed code |
| K0815 | E2375 | BCBST | Edited code is a component of the listed code |
| K0815 | E2376 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0815 | E2381 | BCBST | Edited code is a component of the listed code |
| K0815 | E2382 | BCBST | Edited code is a component of the listed code |
| K0815 | E2383 | BCBST | Edited code is a component of the listed code |
| K0815 | E2384 | BCBST | Edited code is a component of the listed code |
| K0815 | E2385 | BCBST | Edited code is a component of the listed code |
| K0815 | E2386 | BCBST | Edited code is a component of the listed code |
| K0815 | E2387 | BCBST | Edited code is a component of the listed code |
| K0815 | E2388 | BCBST | Edited code is a component of the listed code |
| K0815 | E2389 | BCBST | Edited code is a component of the listed code |
| K0815 | E2390 | BCBST | Edited code is a component of the listed code |
| K0815 | E2391 | BCBST | Edited code is a component of the listed code |
| K0815 | E2392 | BCBST | Edited code is a component of the listed code |
| K0815 | E2393 | BCBST | Edited code is a component of the listed code |
| K0815 | E2394 | BCBST | Edited code is a component of the listed code |
| K0815 | E2395 | BCBST | Edited code is a component of the listed code |
| K0815 | E2396 | BCBST | Edited code is a component of the listed code |
| K0815 | K0015 | BCBST | Edited code is a component of the listed code |
| K0815 | K0017 | BCBST | Edited code is a component of the listed code |
| K0815 | K0018 | BCBST | Edited code is a component of the listed code |
| K0815 | K0019 | BCBST | Edited code is a component of the listed code |
| K0815 | K0020 | BCBST | Edited code is a component of the listed code |
| K0815 | K0037 | BCBST | Edited code is a component of the listed code |
| K0815 | K0040 | BCBST | Edited code is a component of the listed code |
| K0815 | K0041 | BCBST | Edited code is a component of the listed code |
| K0815 | K0042 | BCBST | Edited code is a component of the listed code |
| K0815 | K0043 | BCBST | Edited code is a component of the listed code |
| K0815 | K0044 | BCBST | Edited code is a component of the listed code |
| K0815 | K0045 | BCBST | Edited code is a component of the listed code |
| K0815 | K0046 | BCBST | Edited code is a component of the listed code |
| K0815 | K0047 | BCBST | Edited code is a component of the listed code |
| K0815 | K0051 | BCBST | Edited code is a component of the listed code |
| K0815 | K0052 | BCBST | Edited code is a component of the listed code |
| K0815 | K0098 | BCBST | Edited code is a component of the listed code |
| K0816 | E0971 | BCBST | Edited code is a component of the listed code |
| K0816 | E0978 | BCBST | Edited code is a component of the listed code |
| K0816 | E0981 | BCBST | Edited code is a component of the listed code |
| K0816 | E0982 | BCBST | Edited code is a component of the listed code |
| K0816 | E0995 | BCBST | Edited code is a component of the listed code |
| K0816 | E1225 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0816 | E2357 | BCBST | Edited code is a component of the listed code |
| K0816 | E2366 | BCBST | Edited code is a component of the listed code |
| K0816 | E2368 | BCBST | Edited code is a component of the listed code |
| K0816 | E2369 | BCBST | Edited code is a component of the listed code |
| K0816 | E2370 | BCBST | Edited code is a component of the listed code |
| K0816 | E2374 | BCBST | Edited code is a component of the listed code |
| K0816 | E2375 | BCBST | Edited code is a component of the listed code |
| K0816 | E2376 | BCBST | Edited code is a component of the listed code |
| K0816 | E2381 | BCBST | Edited code is a component of the listed code |
| K0816 | E2382 | BCBST | Edited code is a component of the listed code |
| K0816 | E2383 | BCBST | Edited code is a component of the listed code |
| K0816 | E2384 | BCBST | Edited code is a component of the listed code |
| K0816 | E2385 | BCBST | Edited code is a component of the listed code |
| K0816 | E2386 | BCBST | Edited code is a component of the listed code |
| K0816 | E2387 | BCBST | Edited code is a component of the listed code |
| K0816 | E2388 | BCBST | Edited code is a component of the listed code |
| K0816 | E2389 | BCBST | Edited code is a component of the listed code |
| K0816 | E2390 | BCBST | Edited code is a component of the listed code |
| K0816 | E2391 | BCBST | Edited code is a component of the listed code |
| K0816 | E2392 | BCBST | Edited code is a component of the listed code |
| K0816 | E2393 | BCBST | Edited code is a component of the listed code |
| K0816 | E2394 | BCBST | Edited code is a component of the listed code |
| K0816 | E2395 | BCBST | Edited code is a component of the listed code |
| K0816 | E2396 | BCBST | Edited code is a component of the listed code |
| K0816 | K0015 | BCBST | Edited code is a component of the listed code |
| K0816 | K0017 | BCBST | Edited code is a component of the listed code |
| K0816 | K0018 | BCBST | Edited code is a component of the listed code |
| K0816 | K0019 | BCBST | Edited code is a component of the listed code |
| K0816 | K0020 | BCBST | Edited code is a component of the listed code |
| K0816 | K0037 | BCBST | Edited code is a component of the listed code |
| K0816 | K0040 | BCBST | Edited code is a component of the listed code |
| K0816 | K0041 | BCBST | Edited code is a component of the listed code |
| K0816 | K0042 | BCBST | Edited code is a component of the listed code |
| K0816 | K0043 | BCBST | Edited code is a component of the listed code |
| K0816 | K0044 | BCBST | Edited code is a component of the listed code |
| K0816 | K0045 | BCBST | Edited code is a component of the listed code |
| K0816 | K0046 | BCBST | Edited code is a component of the listed code |
| K0816 | K0047 | BCBST | Edited code is a component of the listed code |
| K0816 | K0051 | BCBST | Edited code is a component of the listed code |

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| K0816 | K0052 | BCBST | Edited code is a component of the listed code |
| K0816 | K0098 | BCBST | Edited code is a component of the listed code |
| K0820 | E0971 | BCBST | Edited code is a component of the listed code |
| K0820 | E0978 | BCBST | Edited code is a component of the listed code |
| K0820 | E0981 | BCBST | Edited code is a component of the listed code |
| K0820 | E0982 | BCBST | Edited code is a component of the listed code |
| K0820 | E0995 | BCBST | Edited code is a component of the listed code |
| K0820 | E1225 | BCBST | Edited code is a component of the listed code |
| K0820 | E2357 | BCBST | Edited code is a component of the listed code |
| K0820 | E2366 | BCBST | Edited code is a component of the listed code |
| K0820 | E2368 | BCBST | Edited code is a component of the listed code |
| K0820 | E2369 | BCBST | Edited code is a component of the listed code |
| K0820 | E2370 | BCBST | Edited code is a component of the listed code |
| K0820 | E2374 | BCBST | Edited code is a component of the listed code |
| K0820 | E2375 | BCBST | Edited code is a component of the listed code |
| K0820 | E2376 | BCBST | Edited code is a component of the listed code |
| K0820 | E2381 | BCBST | Edited code is a component of the listed code |
| K0820 | E2382 | BCBST | Edited code is a component of the listed code |
| K0820 | E2383 | BCBST | Edited code is a component of the listed code |
| K0820 | E2384 | BCBST | Edited code is a component of the listed code |
| K0820 | E2385 | BCBST | Edited code is a component of the listed code |
| K0820 | E2386 | BCBST | Edited code is a component of the listed code |
| K0820 | E2387 | BCBST | Edited code is a component of the listed code |
| K0820 | E2388 | BCBST | Edited code is a component of the listed code |
| K0820 | E2389 | BCBST | Edited code is a component of the listed code |
| K0820 | E2390 | BCBST | Edited code is a component of the listed code |
| K0820 | E2391 | BCBST | Edited code is a component of the listed code |
| K0820 | E2392 | BCBST | Edited code is a component of the listed code |
| K0820 | E2393 | BCBST | Edited code is a component of the listed code |
| K0820 | E2394 | BCBST | Edited code is a component of the listed code |
| K0820 | E2395 | BCBST | Edited code is a component of the listed code |
| K0820 | E2396 | BCBST | Edited code is a component of the listed code |
| K0820 | K0015 | BCBST | Edited code is a component of the listed code |
| K0820 | K0017 | BCBST | Edited code is a component of the listed code |
| K0820 | K0018 | BCBST | Edited code is a component of the listed code |
| K0820 | K0019 | BCBST | Edited code is a component of the listed code |
| K0820 | K0020 | BCBST | Edited code is a component of the listed code |
| K0820 | K0037 | BCBST | Edited code is a component of the listed code |
| K0820 | K0040 | BCBST | Edited code is a component of the listed code |

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|---------------------------|-----------------------|---------------|---|
| K0820 | K0041 | BCBST | Edited code is a component of the listed code |
| K0820 | K0042 | BCBST | Edited code is a component of the listed code |
| K0820 | K0043 | BCBST | Edited code is a component of the listed code |
| K0820 | K0044 | BCBST | Edited code is a component of the listed code |
| K0820 | K0045 | BCBST | Edited code is a component of the listed code |
| K0820 | K0046 | BCBST | Edited code is a component of the listed code |
| K0820 | K0047 | BCBST | Edited code is a component of the listed code |
| K0820 | K0051 | BCBST | Edited code is a component of the listed code |
| K0820 | K0052 | BCBST | Edited code is a component of the listed code |
| K0820 | K0098 | BCBST | Edited code is a component of the listed code |
| K0821 | E0971 | BCBST | Edited code is a component of the listed code |
| K0821 | E0978 | BCBST | Edited code is a component of the listed code |
| K0821 | E0981 | BCBST | Edited code is a component of the listed code |
| K0821 | E0982 | BCBST | Edited code is a component of the listed code |
| K0821 | E0995 | BCBST | Edited code is a component of the listed code |
| K0821 | E1225 | BCBST | Edited code is a component of the listed code |
| K0821 | E2357 | BCBST | Edited code is a component of the listed code |
| K0821 | E2366 | BCBST | Edited code is a component of the listed code |
| K0821 | E2368 | BCBST | Edited code is a component of the listed code |
| K0821 | E2369 | BCBST | Edited code is a component of the listed code |
| K0821 | E2370 | BCBST | Edited code is a component of the listed code |
| K0821 | E2374 | BCBST | Edited code is a component of the listed code |
| K0821 | E2375 | BCBST | Edited code is a component of the listed code |
| K0821 | E2376 | BCBST | Edited code is a component of the listed code |
| K0821 | E2381 | BCBST | Edited code is a component of the listed code |
| K0821 | E2382 | BCBST | Edited code is a component of the listed code |
| K0821 | E2383 | BCBST | Edited code is a component of the listed code |
| K0821 | E2384 | BCBST | Edited code is a component of the listed code |
| K0821 | E2385 | BCBST | Edited code is a component of the listed code |
| K0821 | E2386 | BCBST | Edited code is a component of the listed code |
| K0821 | E2387 | BCBST | Edited code is a component of the listed code |
| K0821 | E2388 | BCBST | Edited code is a component of the listed code |
| K0821 | E2389 | BCBST | Edited code is a component of the listed code |
| K0821 | E2390 | BCBST | Edited code is a component of the listed code |
| K0821 | E2391 | BCBST | Edited code is a component of the listed code |
| K0821 | E2392 | BCBST | Edited code is a component of the listed code |
| K0821 | E2393 | BCBST | Edited code is a component of the listed code |
| K0821 | E2394 | BCBST | Edited code is a component of the listed code |
| K0821 | E2395 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0821 | E2396 | BCBST | Edited code is a component of the listed code |
| K0821 | K0015 | BCBST | Edited code is a component of the listed code |
| K0821 | K0017 | BCBST | Edited code is a component of the listed code |
| K0821 | K0018 | BCBST | Edited code is a component of the listed code |
| K0821 | K0019 | BCBST | Edited code is a component of the listed code |
| K0821 | K0020 | BCBST | Edited code is a component of the listed code |
| K0821 | K0037 | BCBST | Edited code is a component of the listed code |
| K0821 | K0040 | BCBST | Edited code is a component of the listed code |
| K0821 | K0041 | BCBST | Edited code is a component of the listed code |
| K0821 | K0042 | BCBST | Edited code is a component of the listed code |
| K0821 | K0043 | BCBST | Edited code is a component of the listed code |
| K0821 | K0044 | BCBST | Edited code is a component of the listed code |
| K0821 | K0045 | BCBST | Edited code is a component of the listed code |
| K0821 | K0046 | BCBST | Edited code is a component of the listed code |
| K0821 | K0047 | BCBST | Edited code is a component of the listed code |
| K0821 | K0051 | BCBST | Edited code is a component of the listed code |
| K0821 | K0052 | BCBST | Edited code is a component of the listed code |
| K0821 | K0098 | BCBST | Edited code is a component of the listed code |
| K0822 | E0971 | BCBST | Edited code is a component of the listed code |
| K0822 | E0978 | BCBST | Edited code is a component of the listed code |
| K0822 | E0981 | BCBST | Edited code is a component of the listed code |
| K0822 | E0982 | BCBST | Edited code is a component of the listed code |
| K0822 | E0995 | BCBST | Edited code is a component of the listed code |
| K0822 | E1225 | BCBST | Edited code is a component of the listed code |
| K0822 | E2357 | BCBST | Edited code is a component of the listed code |
| K0822 | E2366 | BCBST | Edited code is a component of the listed code |
| K0822 | E2368 | BCBST | Edited code is a component of the listed code |
| K0822 | E2369 | BCBST | Edited code is a component of the listed code |
| K0822 | E2370 | BCBST | Edited code is a component of the listed code |
| K0822 | E2374 | BCBST | Edited code is a component of the listed code |
| K0822 | E2375 | BCBST | Edited code is a component of the listed code |
| K0822 | E2376 | BCBST | Edited code is a component of the listed code |
| K0822 | E2381 | BCBST | Edited code is a component of the listed code |
| K0822 | E2382 | BCBST | Edited code is a component of the listed code |
| K0822 | E2383 | BCBST | Edited code is a component of the listed code |
| K0822 | E2384 | BCBST | Edited code is a component of the listed code |
| K0822 | E2385 | BCBST | Edited code is a component of the listed code |
| K0822 | E2386 | BCBST | Edited code is a component of the listed code |
| K0822 | E2387 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0822 | E2388 | BCBST | Edited code is a component of the listed code |
| K0822 | E2389 | BCBST | Edited code is a component of the listed code |
| K0822 | E2390 | BCBST | Edited code is a component of the listed code |
| K0822 | E2391 | BCBST | Edited code is a component of the listed code |
| K0822 | E2392 | BCBST | Edited code is a component of the listed code |
| K0822 | E2393 | BCBST | Edited code is a component of the listed code |
| K0822 | E2394 | BCBST | Edited code is a component of the listed code |
| K0822 | E2395 | BCBST | Edited code is a component of the listed code |
| K0822 | E2396 | BCBST | Edited code is a component of the listed code |
| K0822 | K0015 | BCBST | Edited code is a component of the listed code |
| K0822 | K0017 | BCBST | Edited code is a component of the listed code |
| K0822 | K0018 | BCBST | Edited code is a component of the listed code |
| K0822 | K0019 | BCBST | Edited code is a component of the listed code |
| K0822 | K0020 | BCBST | Edited code is a component of the listed code |
| K0822 | K0037 | BCBST | Edited code is a component of the listed code |
| K0822 | K0040 | BCBST | Edited code is a component of the listed code |
| K0822 | K0041 | BCBST | Edited code is a component of the listed code |
| K0822 | K0042 | BCBST | Edited code is a component of the listed code |
| K0822 | K0043 | BCBST | Edited code is a component of the listed code |
| K0822 | K0044 | BCBST | Edited code is a component of the listed code |
| K0822 | K0045 | BCBST | Edited code is a component of the listed code |
| K0822 | K0046 | BCBST | Edited code is a component of the listed code |
| K0822 | K0047 | BCBST | Edited code is a component of the listed code |
| K0822 | K0051 | BCBST | Edited code is a component of the listed code |
| K0822 | K0052 | BCBST | Edited code is a component of the listed code |
| K0822 | K0098 | BCBST | Edited code is a component of the listed code |
| K0823 | E0971 | BCBST | Edited code is a component of the listed code |
| K0823 | E0978 | BCBST | Edited code is a component of the listed code |
| K0823 | E0981 | BCBST | Edited code is a component of the listed code |
| K0823 | E0982 | BCBST | Edited code is a component of the listed code |
| K0823 | E0995 | BCBST | Edited code is a component of the listed code |
| K0823 | E1225 | BCBST | Edited code is a component of the listed code |
| K0823 | E2357 | BCBST | Edited code is a component of the listed code |
| K0823 | E2366 | BCBST | Edited code is a component of the listed code |
| K0823 | E2368 | BCBST | Edited code is a component of the listed code |
| K0823 | E2369 | BCBST | Edited code is a component of the listed code |
| K0823 | E2370 | BCBST | Edited code is a component of the listed code |
| K0823 | E2374 | BCBST | Edited code is a component of the listed code |
| K0823 | E2375 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0823 | E2376 | BCBST | Edited code is a component of the listed code |
| K0823 | E2381 | BCBST | Edited code is a component of the listed code |
| K0823 | E2382 | BCBST | Edited code is a component of the listed code |
| K0823 | E2383 | BCBST | Edited code is a component of the listed code |
| K0823 | E2384 | BCBST | Edited code is a component of the listed code |
| K0823 | E2385 | BCBST | Edited code is a component of the listed code |
| K0823 | E2386 | BCBST | Edited code is a component of the listed code |
| K0823 | E2387 | BCBST | Edited code is a component of the listed code |
| K0823 | E2388 | BCBST | Edited code is a component of the listed code |
| K0823 | E2389 | BCBST | Edited code is a component of the listed code |
| K0823 | E2390 | BCBST | Edited code is a component of the listed code |
| K0823 | E2391 | BCBST | Edited code is a component of the listed code |
| K0823 | E2392 | BCBST | Edited code is a component of the listed code |
| K0823 | E2393 | BCBST | Edited code is a component of the listed code |
| K0823 | E2394 | BCBST | Edited code is a component of the listed code |
| K0823 | E2395 | BCBST | Edited code is a component of the listed code |
| K0823 | E2396 | BCBST | Edited code is a component of the listed code |
| K0823 | K0015 | BCBST | Edited code is a component of the listed code |
| K0823 | K0017 | BCBST | Edited code is a component of the listed code |
| K0823 | K0018 | BCBST | Edited code is a component of the listed code |
| K0823 | K0019 | BCBST | Edited code is a component of the listed code |
| K0823 | K0020 | BCBST | Edited code is a component of the listed code |
| K0823 | K0037 | BCBST | Edited code is a component of the listed code |
| K0823 | K0040 | BCBST | Edited code is a component of the listed code |
| K0823 | K0041 | BCBST | Edited code is a component of the listed code |
| K0823 | K0042 | BCBST | Edited code is a component of the listed code |
| K0823 | K0043 | BCBST | Edited code is a component of the listed code |
| K0823 | K0044 | BCBST | Edited code is a component of the listed code |
| K0823 | K0045 | BCBST | Edited code is a component of the listed code |
| K0823 | K0046 | BCBST | Edited code is a component of the listed code |
| K0823 | K0047 | BCBST | Edited code is a component of the listed code |
| K0823 | K0051 | BCBST | Edited code is a component of the listed code |
| K0823 | K0052 | BCBST | Edited code is a component of the listed code |
| K0823 | K0098 | BCBST | Edited code is a component of the listed code |
| K0824 | E0971 | BCBST | Edited code is a component of the listed code |
| K0824 | E0978 | BCBST | Edited code is a component of the listed code |
| K0824 | E0981 | BCBST | Edited code is a component of the listed code |
| K0824 | E0982 | BCBST | Edited code is a component of the listed code |
| K0824 | E0995 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0824 | E1225 | BCBST | Edited code is a component of the listed code |
| K0824 | E2357 | BCBST | Edited code is a component of the listed code |
| K0824 | E2366 | BCBST | Edited code is a component of the listed code |
| K0824 | E2368 | BCBST | Edited code is a component of the listed code |
| K0824 | E2369 | BCBST | Edited code is a component of the listed code |
| K0824 | E2370 | BCBST | Edited code is a component of the listed code |
| K0824 | E2374 | BCBST | Edited code is a component of the listed code |
| K0824 | E2375 | BCBST | Edited code is a component of the listed code |
| K0824 | E2376 | BCBST | Edited code is a component of the listed code |
| K0824 | E2381 | BCBST | Edited code is a component of the listed code |
| K0824 | E2382 | BCBST | Edited code is a component of the listed code |
| K0824 | E2383 | BCBST | Edited code is a component of the listed code |
| K0824 | E2384 | BCBST | Edited code is a component of the listed code |
| K0824 | E2385 | BCBST | Edited code is a component of the listed code |
| K0824 | E2386 | BCBST | Edited code is a component of the listed code |
| K0824 | E2387 | BCBST | Edited code is a component of the listed code |
| K0824 | E2388 | BCBST | Edited code is a component of the listed code |
| K0824 | E2389 | BCBST | Edited code is a component of the listed code |
| K0824 | E2390 | BCBST | Edited code is a component of the listed code |
| K0824 | E2391 | BCBST | Edited code is a component of the listed code |
| K0824 | E2392 | BCBST | Edited code is a component of the listed code |
| K0824 | E2393 | BCBST | Edited code is a component of the listed code |
| K0824 | E2394 | BCBST | Edited code is a component of the listed code |
| K0824 | E2395 | BCBST | Edited code is a component of the listed code |
| K0824 | E2396 | BCBST | Edited code is a component of the listed code |
| K0824 | K0015 | BCBST | Edited code is a component of the listed code |
| K0824 | K0017 | BCBST | Edited code is a component of the listed code |
| K0824 | K0018 | BCBST | Edited code is a component of the listed code |
| K0824 | K0019 | BCBST | Edited code is a component of the listed code |
| K0824 | K0020 | BCBST | Edited code is a component of the listed code |
| K0824 | K0037 | BCBST | Edited code is a component of the listed code |
| K0824 | K0040 | BCBST | Edited code is a component of the listed code |
| K0824 | K0041 | BCBST | Edited code is a component of the listed code |
| K0824 | K0042 | BCBST | Edited code is a component of the listed code |
| K0824 | K0043 | BCBST | Edited code is a component of the listed code |
| K0824 | K0044 | BCBST | Edited code is a component of the listed code |
| K0824 | K0045 | BCBST | Edited code is a component of the listed code |
| K0824 | K0046 | BCBST | Edited code is a component of the listed code |
| K0824 | K0047 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0824 | K0051 | BCBST | Edited code is a component of the listed code |
| K0824 | K0052 | BCBST | Edited code is a component of the listed code |
| K0824 | K0098 | BCBST | Edited code is a component of the listed code |
| K0825 | E0971 | BCBST | Edited code is a component of the listed code |
| K0825 | E0978 | BCBST | Edited code is a component of the listed code |
| K0825 | E0981 | BCBST | Edited code is a component of the listed code |
| K0825 | E0982 | BCBST | Edited code is a component of the listed code |
| K0825 | E0995 | BCBST | Edited code is a component of the listed code |
| K0825 | E1225 | BCBST | Edited code is a component of the listed code |
| K0825 | E2357 | BCBST | Edited code is a component of the listed code |
| K0825 | E2366 | BCBST | Edited code is a component of the listed code |
| K0825 | E2368 | BCBST | Edited code is a component of the listed code |
| K0825 | E2369 | BCBST | Edited code is a component of the listed code |
| K0825 | E2370 | BCBST | Edited code is a component of the listed code |
| K0825 | E2374 | BCBST | Edited code is a component of the listed code |
| K0825 | E2375 | BCBST | Edited code is a component of the listed code |
| K0825 | E2376 | BCBST | Edited code is a component of the listed code |
| K0825 | E2381 | BCBST | Edited code is a component of the listed code |
| K0825 | E2382 | BCBST | Edited code is a component of the listed code |
| K0825 | E2383 | BCBST | Edited code is a component of the listed code |
| K0825 | E2384 | BCBST | Edited code is a component of the listed code |
| K0825 | E2385 | BCBST | Edited code is a component of the listed code |
| K0825 | E2386 | BCBST | Edited code is a component of the listed code |
| K0825 | E2387 | BCBST | Edited code is a component of the listed code |
| K0825 | E2388 | BCBST | Edited code is a component of the listed code |
| K0825 | E2389 | BCBST | Edited code is a component of the listed code |
| K0825 | E2390 | BCBST | Edited code is a component of the listed code |
| K0825 | E2391 | BCBST | Edited code is a component of the listed code |
| K0825 | E2392 | BCBST | Edited code is a component of the listed code |
| K0825 | E2393 | BCBST | Edited code is a component of the listed code |
| K0825 | E2394 | BCBST | Edited code is a component of the listed code |
| K0825 | E2395 | BCBST | Edited code is a component of the listed code |
| K0825 | E2396 | BCBST | Edited code is a component of the listed code |
| K0825 | K0015 | BCBST | Edited code is a component of the listed code |
| K0825 | K0017 | BCBST | Edited code is a component of the listed code |
| K0825 | K0018 | BCBST | Edited code is a component of the listed code |
| K0825 | K0019 | BCBST | Edited code is a component of the listed code |
| K0825 | K0020 | BCBST | Edited code is a component of the listed code |
| K0825 | K0037 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0825 | K0040 | BCBST | Edited code is a component of the listed code |
| K0825 | K0041 | BCBST | Edited code is a component of the listed code |
| K0825 | K0042 | BCBST | Edited code is a component of the listed code |
| K0825 | K0043 | BCBST | Edited code is a component of the listed code |
| K0825 | K0044 | BCBST | Edited code is a component of the listed code |
| K0825 | K0045 | BCBST | Edited code is a component of the listed code |
| K0825 | K0046 | BCBST | Edited code is a component of the listed code |
| K0825 | K0047 | BCBST | Edited code is a component of the listed code |
| K0825 | K0051 | BCBST | Edited code is a component of the listed code |
| K0825 | K0052 | BCBST | Edited code is a component of the listed code |
| K0825 | K0098 | BCBST | Edited code is a component of the listed code |
| K0826 | E0971 | BCBST | Edited code is a component of the listed code |
| K0826 | E0978 | BCBST | Edited code is a component of the listed code |
| K0826 | E0981 | BCBST | Edited code is a component of the listed code |
| K0826 | E0982 | BCBST | Edited code is a component of the listed code |
| K0826 | E0995 | BCBST | Edited code is a component of the listed code |
| K0826 | E1225 | BCBST | Edited code is a component of the listed code |
| K0826 | E2357 | BCBST | Edited code is a component of the listed code |
| K0826 | E2366 | BCBST | Edited code is a component of the listed code |
| K0826 | E2368 | BCBST | Edited code is a component of the listed code |
| K0826 | E2369 | BCBST | Edited code is a component of the listed code |
| K0826 | E2370 | BCBST | Edited code is a component of the listed code |
| K0826 | E2374 | BCBST | Edited code is a component of the listed code |
| K0826 | E2375 | BCBST | Edited code is a component of the listed code |
| K0826 | E2376 | BCBST | Edited code is a component of the listed code |
| K0826 | E2381 | BCBST | Edited code is a component of the listed code |
| K0826 | E2382 | BCBST | Edited code is a component of the listed code |
| K0826 | E2383 | BCBST | Edited code is a component of the listed code |
| K0826 | E2384 | BCBST | Edited code is a component of the listed code |
| K0826 | E2385 | BCBST | Edited code is a component of the listed code |
| K0826 | E2386 | BCBST | Edited code is a component of the listed code |
| K0826 | E2387 | BCBST | Edited code is a component of the listed code |
| K0826 | E2388 | BCBST | Edited code is a component of the listed code |
| K0826 | E2389 | BCBST | Edited code is a component of the listed code |
| K0826 | E2390 | BCBST | Edited code is a component of the listed code |
| K0826 | E2391 | BCBST | Edited code is a component of the listed code |
| K0826 | E2392 | BCBST | Edited code is a component of the listed code |
| K0826 | E2393 | BCBST | Edited code is a component of the listed code |
| K0826 | E2394 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0826 | E2395 | BCBST | Edited code is a component of the listed code |
| K0826 | E2396 | BCBST | Edited code is a component of the listed code |
| K0826 | K0015 | BCBST | Edited code is a component of the listed code |
| K0826 | K0017 | BCBST | Edited code is a component of the listed code |
| K0826 | K0018 | BCBST | Edited code is a component of the listed code |
| K0826 | K0019 | BCBST | Edited code is a component of the listed code |
| K0826 | K0020 | BCBST | Edited code is a component of the listed code |
| K0826 | K0037 | BCBST | Edited code is a component of the listed code |
| K0826 | K0040 | BCBST | Edited code is a component of the listed code |
| K0826 | K0041 | BCBST | Edited code is a component of the listed code |
| K0826 | K0042 | BCBST | Edited code is a component of the listed code |
| K0826 | K0043 | BCBST | Edited code is a component of the listed code |
| K0826 | K0044 | BCBST | Edited code is a component of the listed code |
| K0826 | K0045 | BCBST | Edited code is a component of the listed code |
| K0826 | K0046 | BCBST | Edited code is a component of the listed code |
| K0826 | K0047 | BCBST | Edited code is a component of the listed code |
| K0826 | K0051 | BCBST | Edited code is a component of the listed code |
| K0826 | K0052 | BCBST | Edited code is a component of the listed code |
| K0826 | K0098 | BCBST | Edited code is a component of the listed code |
| K0827 | E0971 | BCBST | Edited code is a component of the listed code |
| K0827 | E0978 | BCBST | Edited code is a component of the listed code |
| K0827 | E0981 | BCBST | Edited code is a component of the listed code |
| K0827 | E0982 | BCBST | Edited code is a component of the listed code |
| K0827 | E0995 | BCBST | Edited code is a component of the listed code |
| K0827 | E1225 | BCBST | Edited code is a component of the listed code |
| K0827 | E2357 | BCBST | Edited code is a component of the listed code |
| K0827 | E2366 | BCBST | Edited code is a component of the listed code |
| K0827 | E2368 | BCBST | Edited code is a component of the listed code |
| K0827 | E2369 | BCBST | Edited code is a component of the listed code |
| K0827 | E2370 | BCBST | Edited code is a component of the listed code |
| K0827 | E2374 | BCBST | Edited code is a component of the listed code |
| K0827 | E2375 | BCBST | Edited code is a component of the listed code |
| K0827 | E2376 | BCBST | Edited code is a component of the listed code |
| K0827 | E2381 | BCBST | Edited code is a component of the listed code |
| K0827 | E2382 | BCBST | Edited code is a component of the listed code |
| K0827 | E2383 | BCBST | Edited code is a component of the listed code |
| K0827 | E2384 | BCBST | Edited code is a component of the listed code |
| K0827 | E2385 | BCBST | Edited code is a component of the listed code |
| K0827 | E2386 | BCBST | Edited code is a component of the listed code |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0827 | E2387 | BCBST | Edited code is a component of the listed code |
| K0827 | E2388 | BCBST | Edited code is a component of the listed code |
| K0827 | E2389 | BCBST | Edited code is a component of the listed code |
| K0827 | E2390 | BCBST | Edited code is a component of the listed code |
| K0827 | E2391 | BCBST | Edited code is a component of the listed code |
| K0827 | E2392 | BCBST | Edited code is a component of the listed code |
| K0827 | E2393 | BCBST | Edited code is a component of the listed code |
| K0827 | E2394 | BCBST | Edited code is a component of the listed code |
| K0827 | E2395 | BCBST | Edited code is a component of the listed code |
| K0827 | E2396 | BCBST | Edited code is a component of the listed code |
| K0827 | K0015 | BCBST | Edited code is a component of the listed code |
| K0827 | K0017 | BCBST | Edited code is a component of the listed code |
| K0827 | K0018 | BCBST | Edited code is a component of the listed code |
| K0827 | K0019 | BCBST | Edited code is a component of the listed code |
| K0827 | K0020 | BCBST | Edited code is a component of the listed code |
| K0827 | K0037 | BCBST | Edited code is a component of the listed code |
| K0827 | K0040 | BCBST | Edited code is a component of the listed code |
| K0827 | K0041 | BCBST | Edited code is a component of the listed code |
| K0827 | K0042 | BCBST | Edited code is a component of the listed code |
| K0827 | K0043 | BCBST | Edited code is a component of the listed code |
| K0827 | K0044 | BCBST | Edited code is a component of the listed code |
| K0827 | K0045 | BCBST | Edited code is a component of the listed code |
| K0827 | K0046 | BCBST | Edited code is a component of the listed code |
| K0827 | K0047 | BCBST | Edited code is a component of the listed code |
| K0827 | K0051 | BCBST | Edited code is a component of the listed code |
| K0827 | K0052 | BCBST | Edited code is a component of the listed code |
| K0827 | K0098 | BCBST | Edited code is a component of the listed code |
| K0828 | E0971 | BCBST | Edited code is a component of the listed code |
| K0828 | E0978 | BCBST | Edited code is a component of the listed code |
| K0828 | E0981 | BCBST | Edited code is a component of the listed code |
| K0828 | E0982 | BCBST | Edited code is a component of the listed code |
| K0828 | E0995 | BCBST | Edited code is a component of the listed code |
| K0828 | E1225 | BCBST | Edited code is a component of the listed code |
| K0828 | E2357 | BCBST | Edited code is a component of the listed code |
| K0828 | E2366 | BCBST | Edited code is a component of the listed code |
| K0828 | E2368 | BCBST | Edited code is a component of the listed code |
| K0828 | E2369 | BCBST | Edited code is a component of the listed code |
| K0828 | E2370 | BCBST | Edited code is a component of the listed code |
| K0828 | E2374 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0828 | E2375 | BCBST | Edited code is a component of the listed code |
| K0828 | E2376 | BCBST | Edited code is a component of the listed code |
| K0828 | E2381 | BCBST | Edited code is a component of the listed code |
| K0828 | E2382 | BCBST | Edited code is a component of the listed code |
| K0828 | E2383 | BCBST | Edited code is a component of the listed code |
| K0828 | E2384 | BCBST | Edited code is a component of the listed code |
| K0828 | E2385 | BCBST | Edited code is a component of the listed code |
| K0828 | E2386 | BCBST | Edited code is a component of the listed code |
| K0828 | E2387 | BCBST | Edited code is a component of the listed code |
| K0828 | E2388 | BCBST | Edited code is a component of the listed code |
| K0828 | E2389 | BCBST | Edited code is a component of the listed code |
| K0828 | E2390 | BCBST | Edited code is a component of the listed code |
| K0828 | E2391 | BCBST | Edited code is a component of the listed code |
| K0828 | E2392 | BCBST | Edited code is a component of the listed code |
| K0828 | E2393 | BCBST | Edited code is a component of the listed code |
| K0828 | E2394 | BCBST | Edited code is a component of the listed code |
| K0828 | E2395 | BCBST | Edited code is a component of the listed code |
| K0828 | E2396 | BCBST | Edited code is a component of the listed code |
| K0828 | K0015 | BCBST | Edited code is a component of the listed code |
| K0828 | K0017 | BCBST | Edited code is a component of the listed code |
| K0828 | K0018 | BCBST | Edited code is a component of the listed code |
| K0828 | K0019 | BCBST | Edited code is a component of the listed code |
| K0828 | K0020 | BCBST | Edited code is a component of the listed code |
| K0828 | K0037 | BCBST | Edited code is a component of the listed code |
| K0828 | K0040 | BCBST | Edited code is a component of the listed code |
| K0828 | K0041 | BCBST | Edited code is a component of the listed code |
| K0828 | K0042 | BCBST | Edited code is a component of the listed code |
| K0828 | K0043 | BCBST | Edited code is a component of the listed code |
| K0828 | K0044 | BCBST | Edited code is a component of the listed code |
| K0828 | K0045 | BCBST | Edited code is a component of the listed code |
| K0828 | K0046 | BCBST | Edited code is a component of the listed code |
| K0828 | K0047 | BCBST | Edited code is a component of the listed code |
| K0828 | K0051 | BCBST | Edited code is a component of the listed code |
| K0828 | K0052 | BCBST | Edited code is a component of the listed code |
| K0828 | K0098 | BCBST | Edited code is a component of the listed code |
| K0829 | E0971 | BCBST | Edited code is a component of the listed code |
| K0829 | E0978 | BCBST | Edited code is a component of the listed code |
| K0829 | E0981 | BCBST | Edited code is a component of the listed code |
| K0829 | E0982 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0829 | E0995 | BCBST | Edited code is a component of the listed code |
| K0829 | E1225 | BCBST | Edited code is a component of the listed code |
| K0829 | E2357 | BCBST | Edited code is a component of the listed code |
| K0829 | E2366 | BCBST | Edited code is a component of the listed code |
| K0829 | E2368 | BCBST | Edited code is a component of the listed code |
| K0829 | E2369 | BCBST | Edited code is a component of the listed code |
| K0829 | E2370 | BCBST | Edited code is a component of the listed code |
| K0829 | E2374 | BCBST | Edited code is a component of the listed code |
| K0829 | E2375 | BCBST | Edited code is a component of the listed code |
| K0829 | E2376 | BCBST | Edited code is a component of the listed code |
| K0829 | E2381 | BCBST | Edited code is a component of the listed code |
| K0829 | E2382 | BCBST | Edited code is a component of the listed code |
| K0829 | E2383 | BCBST | Edited code is a component of the listed code |
| K0829 | E2384 | BCBST | Edited code is a component of the listed code |
| K0829 | E2385 | BCBST | Edited code is a component of the listed code |
| K0829 | E2386 | BCBST | Edited code is a component of the listed code |
| K0829 | E2387 | BCBST | Edited code is a component of the listed code |
| K0829 | E2388 | BCBST | Edited code is a component of the listed code |
| K0829 | E2389 | BCBST | Edited code is a component of the listed code |
| K0829 | E2390 | BCBST | Edited code is a component of the listed code |
| K0829 | E2391 | BCBST | Edited code is a component of the listed code |
| K0829 | E2392 | BCBST | Edited code is a component of the listed code |
| K0829 | E2393 | BCBST | Edited code is a component of the listed code |
| K0829 | E2394 | BCBST | Edited code is a component of the listed code |
| K0829 | E2395 | BCBST | Edited code is a component of the listed code |
| K0829 | E2396 | BCBST | Edited code is a component of the listed code |
| K0829 | K0015 | BCBST | Edited code is a component of the listed code |
| K0829 | K0017 | BCBST | Edited code is a component of the listed code |
| K0829 | K0018 | BCBST | Edited code is a component of the listed code |
| K0829 | K0019 | BCBST | Edited code is a component of the listed code |
| K0829 | K0020 | BCBST | Edited code is a component of the listed code |
| K0829 | K0037 | BCBST | Edited code is a component of the listed code |
| K0829 | K0040 | BCBST | Edited code is a component of the listed code |
| K0829 | K0041 | BCBST | Edited code is a component of the listed code |
| K0829 | K0042 | BCBST | Edited code is a component of the listed code |
| K0829 | K0043 | BCBST | Edited code is a component of the listed code |
| K0829 | K0044 | BCBST | Edited code is a component of the listed code |
| K0829 | K0045 | BCBST | Edited code is a component of the listed code |
| K0829 | K0046 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0829 | K0047 | BCBST | Edited code is a component of the listed code |
| K0829 | K0051 | BCBST | Edited code is a component of the listed code |
| K0829 | K0052 | BCBST | Edited code is a component of the listed code |
| K0829 | K0098 | BCBST | Edited code is a component of the listed code |
| K0830 | E0971 | BCBST | Edited code is a component of the listed code |
| K0830 | E0978 | BCBST | Edited code is a component of the listed code |
| K0830 | E0981 | BCBST | Edited code is a component of the listed code |
| K0830 | E0982 | BCBST | Edited code is a component of the listed code |
| K0830 | E0995 | BCBST | Edited code is a component of the listed code |
| K0830 | E1225 | BCBST | Edited code is a component of the listed code |
| K0830 | E2357 | BCBST | Edited code is a component of the listed code |
| K0830 | E2366 | BCBST | Edited code is a component of the listed code |
| K0830 | E2368 | BCBST | Edited code is a component of the listed code |
| K0830 | E2369 | BCBST | Edited code is a component of the listed code |
| K0830 | E2370 | BCBST | Edited code is a component of the listed code |
| K0830 | E2374 | BCBST | Edited code is a component of the listed code |
| K0830 | E2375 | BCBST | Edited code is a component of the listed code |
| K0830 | E2376 | BCBST | Edited code is a component of the listed code |
| K0830 | E2381 | BCBST | Edited code is a component of the listed code |
| K0830 | E2382 | BCBST | Edited code is a component of the listed code |
| K0830 | E2383 | BCBST | Edited code is a component of the listed code |
| K0830 | E2384 | BCBST | Edited code is a component of the listed code |
| K0830 | E2385 | BCBST | Edited code is a component of the listed code |
| K0830 | E2386 | BCBST | Edited code is a component of the listed code |
| K0830 | E2387 | BCBST | Edited code is a component of the listed code |
| K0830 | E2388 | BCBST | Edited code is a component of the listed code |
| K0830 | E2389 | BCBST | Edited code is a component of the listed code |
| K0830 | E2390 | BCBST | Edited code is a component of the listed code |
| K0830 | E2391 | BCBST | Edited code is a component of the listed code |
| K0830 | E2392 | BCBST | Edited code is a component of the listed code |
| K0830 | E2393 | BCBST | Edited code is a component of the listed code |
| K0830 | E2394 | BCBST | Edited code is a component of the listed code |
| K0830 | E2395 | BCBST | Edited code is a component of the listed code |
| K0830 | E2396 | BCBST | Edited code is a component of the listed code |
| K0830 | K0015 | BCBST | Edited code is a component of the listed code |
| K0830 | K0017 | BCBST | Edited code is a component of the listed code |
| K0830 | K0018 | BCBST | Edited code is a component of the listed code |
| K0830 | K0019 | BCBST | Edited code is a component of the listed code |
| K0830 | K0020 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0830 | K0037 | BCBST | Edited code is a component of the listed code |
| K0830 | K0040 | BCBST | Edited code is a component of the listed code |
| K0830 | K0041 | BCBST | Edited code is a component of the listed code |
| K0830 | K0042 | BCBST | Edited code is a component of the listed code |
| K0830 | K0043 | BCBST | Edited code is a component of the listed code |
| K0830 | K0044 | BCBST | Edited code is a component of the listed code |
| K0830 | K0045 | BCBST | Edited code is a component of the listed code |
| K0830 | K0046 | BCBST | Edited code is a component of the listed code |
| K0830 | K0047 | BCBST | Edited code is a component of the listed code |
| K0830 | K0051 | BCBST | Edited code is a component of the listed code |
| K0830 | K0052 | BCBST | Edited code is a component of the listed code |
| K0830 | K0098 | BCBST | Edited code is a component of the listed code |
| K0831 | E0971 | BCBST | Edited code is a component of the listed code |
| K0831 | E0978 | BCBST | Edited code is a component of the listed code |
| K0831 | E0981 | BCBST | Edited code is a component of the listed code |
| K0831 | E0982 | BCBST | Edited code is a component of the listed code |
| K0831 | E0995 | BCBST | Edited code is a component of the listed code |
| K0831 | E1225 | BCBST | Edited code is a component of the listed code |
| K0831 | E2357 | BCBST | Edited code is a component of the listed code |
| K0831 | E2366 | BCBST | Edited code is a component of the listed code |
| K0831 | E2368 | BCBST | Edited code is a component of the listed code |
| K0831 | E2369 | BCBST | Edited code is a component of the listed code |
| K0831 | E2370 | BCBST | Edited code is a component of the listed code |
| K0831 | E2374 | BCBST | Edited code is a component of the listed code |
| K0831 | E2375 | BCBST | Edited code is a component of the listed code |
| K0831 | E2376 | BCBST | Edited code is a component of the listed code |
| K0831 | E2381 | BCBST | Edited code is a component of the listed code |
| K0831 | E2382 | BCBST | Edited code is a component of the listed code |
| K0831 | E2383 | BCBST | Edited code is a component of the listed code |
| K0831 | E2384 | BCBST | Edited code is a component of the listed code |
| K0831 | E2385 | BCBST | Edited code is a component of the listed code |
| K0831 | E2386 | BCBST | Edited code is a component of the listed code |
| K0831 | E2387 | BCBST | Edited code is a component of the listed code |
| K0831 | E2388 | BCBST | Edited code is a component of the listed code |
| K0831 | E2389 | BCBST | Edited code is a component of the listed code |
| K0831 | E2390 | BCBST | Edited code is a component of the listed code |
| K0831 | E2391 | BCBST | Edited code is a component of the listed code |
| K0831 | E2392 | BCBST | Edited code is a component of the listed code |
| K0831 | E2393 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0831 | E2394 | BCBST | Edited code is a component of the listed code |
| K0831 | E2395 | BCBST | Edited code is a component of the listed code |
| K0831 | E2396 | BCBST | Edited code is a component of the listed code |
| K0831 | K0015 | BCBST | Edited code is a component of the listed code |
| K0831 | K0017 | BCBST | Edited code is a component of the listed code |
| K0831 | K0018 | BCBST | Edited code is a component of the listed code |
| K0831 | K0019 | BCBST | Edited code is a component of the listed code |
| K0831 | K0020 | BCBST | Edited code is a component of the listed code |
| K0831 | K0037 | BCBST | Edited code is a component of the listed code |
| K0831 | K0040 | BCBST | Edited code is a component of the listed code |
| K0831 | K0041 | BCBST | Edited code is a component of the listed code |
| K0831 | K0042 | BCBST | Edited code is a component of the listed code |
| K0831 | K0043 | BCBST | Edited code is a component of the listed code |
| K0831 | K0044 | BCBST | Edited code is a component of the listed code |
| K0831 | K0045 | BCBST | Edited code is a component of the listed code |
| K0831 | K0046 | BCBST | Edited code is a component of the listed code |
| K0831 | K0047 | BCBST | Edited code is a component of the listed code |
| K0831 | K0051 | BCBST | Edited code is a component of the listed code |
| K0831 | K0052 | BCBST | Edited code is a component of the listed code |
| K0831 | K0098 | BCBST | Edited code is a component of the listed code |
| K0835 | E0971 | BCBST | Edited code is a component of the listed code |
| K0835 | E0978 | BCBST | Edited code is a component of the listed code |
| K0835 | E0981 | BCBST | Edited code is a component of the listed code |
| K0835 | E0982 | BCBST | Edited code is a component of the listed code |
| K0835 | E0995 | BCBST | Edited code is a component of the listed code |
| K0835 | E1225 | BCBST | Edited code is a component of the listed code |
| K0835 | E2357 | BCBST | Edited code is a component of the listed code |
| K0835 | E2366 | BCBST | Edited code is a component of the listed code |
| K0835 | E2368 | BCBST | Edited code is a component of the listed code |
| K0835 | E2369 | BCBST | Edited code is a component of the listed code |
| K0835 | E2370 | BCBST | Edited code is a component of the listed code |
| K0835 | E2374 | BCBST | Edited code is a component of the listed code |
| K0835 | E2375 | BCBST | Edited code is a component of the listed code |
| K0835 | E2376 | BCBST | Edited code is a component of the listed code |
| K0835 | E2381 | BCBST | Edited code is a component of the listed code |
| K0835 | E2382 | BCBST | Edited code is a component of the listed code |
| K0835 | E2383 | BCBST | Edited code is a component of the listed code |
| K0835 | E2384 | BCBST | Edited code is a component of the listed code |
| K0835 | E2385 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0835 | E2386 | BCBST | Edited code is a component of the listed code |
| K0835 | E2387 | BCBST | Edited code is a component of the listed code |
| K0835 | E2388 | BCBST | Edited code is a component of the listed code |
| K0835 | E2389 | BCBST | Edited code is a component of the listed code |
| K0835 | E2390 | BCBST | Edited code is a component of the listed code |
| K0835 | E2391 | BCBST | Edited code is a component of the listed code |
| K0835 | E2392 | BCBST | Edited code is a component of the listed code |
| K0835 | E2393 | BCBST | Edited code is a component of the listed code |
| K0835 | E2394 | BCBST | Edited code is a component of the listed code |
| K0835 | E2395 | BCBST | Edited code is a component of the listed code |
| K0835 | E2396 | BCBST | Edited code is a component of the listed code |
| K0835 | K0015 | BCBST | Edited code is a component of the listed code |
| K0835 | K0017 | BCBST | Edited code is a component of the listed code |
| K0835 | K0018 | BCBST | Edited code is a component of the listed code |
| K0835 | K0019 | BCBST | Edited code is a component of the listed code |
| K0835 | K0020 | BCBST | Edited code is a component of the listed code |
| K0835 | K0037 | BCBST | Edited code is a component of the listed code |
| K0835 | K0040 | BCBST | Edited code is a component of the listed code |
| K0835 | K0041 | BCBST | Edited code is a component of the listed code |
| K0835 | K0042 | BCBST | Edited code is a component of the listed code |
| K0835 | K0043 | BCBST | Edited code is a component of the listed code |
| K0835 | K0044 | BCBST | Edited code is a component of the listed code |
| K0835 | K0045 | BCBST | Edited code is a component of the listed code |
| K0835 | K0046 | BCBST | Edited code is a component of the listed code |
| K0835 | K0047 | BCBST | Edited code is a component of the listed code |
| K0835 | K0051 | BCBST | Edited code is a component of the listed code |
| K0835 | K0052 | BCBST | Edited code is a component of the listed code |
| K0835 | K0098 | BCBST | Edited code is a component of the listed code |
| K0836 | E0971 | BCBST | Edited code is a component of the listed code |
| K0836 | E0978 | BCBST | Edited code is a component of the listed code |
| K0836 | E0981 | BCBST | Edited code is a component of the listed code |
| K0836 | E0982 | BCBST | Edited code is a component of the listed code |
| K0836 | E0995 | BCBST | Edited code is a component of the listed code |
| K0836 | E1225 | BCBST | Edited code is a component of the listed code |
| K0836 | E2357 | BCBST | Edited code is a component of the listed code |
| K0836 | E2366 | BCBST | Edited code is a component of the listed code |
| K0836 | E2368 | BCBST | Edited code is a component of the listed code |
| K0836 | E2369 | BCBST | Edited code is a component of the listed code |
| K0836 | E2370 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0836 | E2374 | BCBST | Edited code is a component of the listed code |
| K0836 | E2375 | BCBST | Edited code is a component of the listed code |
| K0836 | E2376 | BCBST | Edited code is a component of the listed code |
| K0836 | E2381 | BCBST | Edited code is a component of the listed code |
| K0836 | E2382 | BCBST | Edited code is a component of the listed code |
| K0836 | E2383 | BCBST | Edited code is a component of the listed code |
| K0836 | E2384 | BCBST | Edited code is a component of the listed code |
| K0836 | E2385 | BCBST | Edited code is a component of the listed code |
| K0836 | E2386 | BCBST | Edited code is a component of the listed code |
| K0836 | E2387 | BCBST | Edited code is a component of the listed code |
| K0836 | E2388 | BCBST | Edited code is a component of the listed code |
| K0836 | E2389 | BCBST | Edited code is a component of the listed code |
| K0836 | E2390 | BCBST | Edited code is a component of the listed code |
| K0836 | E2391 | BCBST | Edited code is a component of the listed code |
| K0836 | E2392 | BCBST | Edited code is a component of the listed code |
| K0836 | E2393 | BCBST | Edited code is a component of the listed code |
| K0836 | E2394 | BCBST | Edited code is a component of the listed code |
| K0836 | E2395 | BCBST | Edited code is a component of the listed code |
| K0836 | E2396 | BCBST | Edited code is a component of the listed code |
| K0836 | K0015 | BCBST | Edited code is a component of the listed code |
| K0836 | K0017 | BCBST | Edited code is a component of the listed code |
| K0836 | K0018 | BCBST | Edited code is a component of the listed code |
| K0836 | K0019 | BCBST | Edited code is a component of the listed code |
| K0836 | K0020 | BCBST | Edited code is a component of the listed code |
| K0836 | K0037 | BCBST | Edited code is a component of the listed code |
| K0836 | K0040 | BCBST | Edited code is a component of the listed code |
| K0836 | K0041 | BCBST | Edited code is a component of the listed code |
| K0836 | K0042 | BCBST | Edited code is a component of the listed code |
| K0836 | K0043 | BCBST | Edited code is a component of the listed code |
| K0836 | K0044 | BCBST | Edited code is a component of the listed code |
| K0836 | K0045 | BCBST | Edited code is a component of the listed code |
| K0836 | K0046 | BCBST | Edited code is a component of the listed code |
| K0836 | K0047 | BCBST | Edited code is a component of the listed code |
| K0836 | K0051 | BCBST | Edited code is a component of the listed code |
| K0836 | K0052 | BCBST | Edited code is a component of the listed code |
| K0836 | K0098 | BCBST | Edited code is a component of the listed code |
| K0837 | E0971 | BCBST | Edited code is a component of the listed code |
| K0837 | E0978 | BCBST | Edited code is a component of the listed code |
| K0837 | E0981 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0837 | E0982 | BCBST | Edited code is a component of the listed code |
| K0837 | E0995 | BCBST | Edited code is a component of the listed code |
| K0837 | E1225 | BCBST | Edited code is a component of the listed code |
| K0837 | E2357 | BCBST | Edited code is a component of the listed code |
| K0837 | E2366 | BCBST | Edited code is a component of the listed code |
| K0837 | E2368 | BCBST | Edited code is a component of the listed code |
| K0837 | E2369 | BCBST | Edited code is a component of the listed code |
| K0837 | E2370 | BCBST | Edited code is a component of the listed code |
| K0837 | E2374 | BCBST | Edited code is a component of the listed code |
| K0837 | E2375 | BCBST | Edited code is a component of the listed code |
| K0837 | E2376 | BCBST | Edited code is a component of the listed code |
| K0837 | E2381 | BCBST | Edited code is a component of the listed code |
| K0837 | E2382 | BCBST | Edited code is a component of the listed code |
| K0837 | E2383 | BCBST | Edited code is a component of the listed code |
| K0837 | E2384 | BCBST | Edited code is a component of the listed code |
| K0837 | E2385 | BCBST | Edited code is a component of the listed code |
| K0837 | E2386 | BCBST | Edited code is a component of the listed code |
| K0837 | E2387 | BCBST | Edited code is a component of the listed code |
| K0837 | E2388 | BCBST | Edited code is a component of the listed code |
| K0837 | E2389 | BCBST | Edited code is a component of the listed code |
| K0837 | E2390 | BCBST | Edited code is a component of the listed code |
| K0837 | E2391 | BCBST | Edited code is a component of the listed code |
| K0837 | E2392 | BCBST | Edited code is a component of the listed code |
| K0837 | E2393 | BCBST | Edited code is a component of the listed code |
| K0837 | E2394 | BCBST | Edited code is a component of the listed code |
| K0837 | E2395 | BCBST | Edited code is a component of the listed code |
| K0837 | E2396 | BCBST | Edited code is a component of the listed code |
| K0837 | K0015 | BCBST | Edited code is a component of the listed code |
| K0837 | K0017 | BCBST | Edited code is a component of the listed code |
| K0837 | K0018 | BCBST | Edited code is a component of the listed code |
| K0837 | K0019 | BCBST | Edited code is a component of the listed code |
| K0837 | K0020 | BCBST | Edited code is a component of the listed code |
| K0837 | K0037 | BCBST | Edited code is a component of the listed code |
| K0837 | K0040 | BCBST | Edited code is a component of the listed code |
| K0837 | K0041 | BCBST | Edited code is a component of the listed code |
| K0837 | K0042 | BCBST | Edited code is a component of the listed code |
| K0837 | K0043 | BCBST | Edited code is a component of the listed code |
| K0837 | K0044 | BCBST | Edited code is a component of the listed code |
| K0837 | K0045 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0837 | K0046 | BCBST | Edited code is a component of the listed code |
| K0837 | K0047 | BCBST | Edited code is a component of the listed code |
| K0837 | K0051 | BCBST | Edited code is a component of the listed code |
| K0837 | K0052 | BCBST | Edited code is a component of the listed code |
| K0837 | K0098 | BCBST | Edited code is a component of the listed code |
| K0838 | E0971 | BCBST | Edited code is a component of the listed code |
| K0838 | E0978 | BCBST | Edited code is a component of the listed code |
| K0838 | E0981 | BCBST | Edited code is a component of the listed code |
| K0838 | E0982 | BCBST | Edited code is a component of the listed code |
| K0838 | E0995 | BCBST | Edited code is a component of the listed code |
| K0838 | E1225 | BCBST | Edited code is a component of the listed code |
| K0838 | E2357 | BCBST | Edited code is a component of the listed code |
| K0838 | E2366 | BCBST | Edited code is a component of the listed code |
| K0838 | E2368 | BCBST | Edited code is a component of the listed code |
| K0838 | E2369 | BCBST | Edited code is a component of the listed code |
| K0838 | E2370 | BCBST | Edited code is a component of the listed code |
| K0838 | E2374 | BCBST | Edited code is a component of the listed code |
| K0838 | E2375 | BCBST | Edited code is a component of the listed code |
| K0838 | E2376 | BCBST | Edited code is a component of the listed code |
| K0838 | E2381 | BCBST | Edited code is a component of the listed code |
| K0838 | E2382 | BCBST | Edited code is a component of the listed code |
| K0838 | E2383 | BCBST | Edited code is a component of the listed code |
| K0838 | E2384 | BCBST | Edited code is a component of the listed code |
| K0838 | E2385 | BCBST | Edited code is a component of the listed code |
| K0838 | E2386 | BCBST | Edited code is a component of the listed code |
| K0838 | E2387 | BCBST | Edited code is a component of the listed code |
| K0838 | E2388 | BCBST | Edited code is a component of the listed code |
| K0838 | E2389 | BCBST | Edited code is a component of the listed code |
| K0838 | E2390 | BCBST | Edited code is a component of the listed code |
| K0838 | E2391 | BCBST | Edited code is a component of the listed code |
| K0838 | E2392 | BCBST | Edited code is a component of the listed code |
| K0838 | E2393 | BCBST | Edited code is a component of the listed code |
| K0838 | E2394 | BCBST | Edited code is a component of the listed code |
| K0838 | E2395 | BCBST | Edited code is a component of the listed code |
| K0838 | E2396 | BCBST | Edited code is a component of the listed code |
| K0838 | K0015 | BCBST | Edited code is a component of the listed code |
| K0838 | K0017 | BCBST | Edited code is a component of the listed code |
| K0838 | K0018 | BCBST | Edited code is a component of the listed code |
| K0838 | K0019 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0838 | K0020 | BCBST | Edited code is a component of the listed code |
| K0838 | K0037 | BCBST | Edited code is a component of the listed code |
| K0838 | K0040 | BCBST | Edited code is a component of the listed code |
| K0838 | K0041 | BCBST | Edited code is a component of the listed code |
| K0838 | K0042 | BCBST | Edited code is a component of the listed code |
| K0838 | K0043 | BCBST | Edited code is a component of the listed code |
| K0838 | K0044 | BCBST | Edited code is a component of the listed code |
| K0838 | K0045 | BCBST | Edited code is a component of the listed code |
| K0838 | K0046 | BCBST | Edited code is a component of the listed code |
| K0838 | K0047 | BCBST | Edited code is a component of the listed code |
| K0838 | K0051 | BCBST | Edited code is a component of the listed code |
| K0838 | K0052 | BCBST | Edited code is a component of the listed code |
| K0838 | K0098 | BCBST | Edited code is a component of the listed code |
| K0839 | E0971 | BCBST | Edited code is a component of the listed code |
| K0839 | E0978 | BCBST | Edited code is a component of the listed code |
| K0839 | E0981 | BCBST | Edited code is a component of the listed code |
| K0839 | E0982 | BCBST | Edited code is a component of the listed code |
| K0839 | E0995 | BCBST | Edited code is a component of the listed code |
| K0839 | E1225 | BCBST | Edited code is a component of the listed code |
| K0839 | E2357 | BCBST | Edited code is a component of the listed code |
| K0839 | E2366 | BCBST | Edited code is a component of the listed code |
| K0839 | E2368 | BCBST | Edited code is a component of the listed code |
| K0839 | E2369 | BCBST | Edited code is a component of the listed code |
| K0839 | E2370 | BCBST | Edited code is a component of the listed code |
| K0839 | E2374 | BCBST | Edited code is a component of the listed code |
| K0839 | E2375 | BCBST | Edited code is a component of the listed code |
| K0839 | E2376 | BCBST | Edited code is a component of the listed code |
| K0839 | E2381 | BCBST | Edited code is a component of the listed code |
| K0839 | E2382 | BCBST | Edited code is a component of the listed code |
| K0839 | E2383 | BCBST | Edited code is a component of the listed code |
| K0839 | E2384 | BCBST | Edited code is a component of the listed code |
| K0839 | E2385 | BCBST | Edited code is a component of the listed code |
| K0839 | E2386 | BCBST | Edited code is a component of the listed code |
| K0839 | E2387 | BCBST | Edited code is a component of the listed code |
| K0839 | E2388 | BCBST | Edited code is a component of the listed code |
| K0839 | E2389 | BCBST | Edited code is a component of the listed code |
| K0839 | E2390 | BCBST | Edited code is a component of the listed code |
| K0839 | E2391 | BCBST | Edited code is a component of the listed code |
| K0839 | E2392 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0839 | E2393 | BCBST | Edited code is a component of the listed code |
| K0839 | E2394 | BCBST | Edited code is a component of the listed code |
| K0839 | E2395 | BCBST | Edited code is a component of the listed code |
| K0839 | E2396 | BCBST | Edited code is a component of the listed code |
| K0839 | K0015 | BCBST | Edited code is a component of the listed code |
| K0839 | K0017 | BCBST | Edited code is a component of the listed code |
| K0839 | K0018 | BCBST | Edited code is a component of the listed code |
| K0839 | K0019 | BCBST | Edited code is a component of the listed code |
| K0839 | K0020 | BCBST | Edited code is a component of the listed code |
| K0839 | K0037 | BCBST | Edited code is a component of the listed code |
| K0839 | K0040 | BCBST | Edited code is a component of the listed code |
| K0839 | K0041 | BCBST | Edited code is a component of the listed code |
| K0839 | K0042 | BCBST | Edited code is a component of the listed code |
| K0839 | K0043 | BCBST | Edited code is a component of the listed code |
| K0839 | K0044 | BCBST | Edited code is a component of the listed code |
| K0839 | K0045 | BCBST | Edited code is a component of the listed code |
| K0839 | K0046 | BCBST | Edited code is a component of the listed code |
| K0839 | K0047 | BCBST | Edited code is a component of the listed code |
| K0839 | K0051 | BCBST | Edited code is a component of the listed code |
| K0839 | K0052 | BCBST | Edited code is a component of the listed code |
| K0839 | K0098 | BCBST | Edited code is a component of the listed code |
| K0840 | E0971 | BCBST | Edited code is a component of the listed code |
| K0840 | E0978 | BCBST | Edited code is a component of the listed code |
| K0840 | E0981 | BCBST | Edited code is a component of the listed code |
| K0840 | E0982 | BCBST | Edited code is a component of the listed code |
| K0840 | E0995 | BCBST | Edited code is a component of the listed code |
| K0840 | E1225 | BCBST | Edited code is a component of the listed code |
| K0840 | E2357 | BCBST | Edited code is a component of the listed code |
| K0840 | E2366 | BCBST | Edited code is a component of the listed code |
| K0840 | E2368 | BCBST | Edited code is a component of the listed code |
| K0840 | E2369 | BCBST | Edited code is a component of the listed code |
| K0840 | E2370 | BCBST | Edited code is a component of the listed code |
| K0840 | E2374 | BCBST | Edited code is a component of the listed code |
| K0840 | E2375 | BCBST | Edited code is a component of the listed code |
| K0840 | E2376 | BCBST | Edited code is a component of the listed code |
| K0840 | E2381 | BCBST | Edited code is a component of the listed code |
| K0840 | E2382 | BCBST | Edited code is a component of the listed code |
| K0840 | E2383 | BCBST | Edited code is a component of the listed code |
| K0840 | E2384 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0840 | E2385 | BCBST | Edited code is a component of the listed code |
| K0840 | E2386 | BCBST | Edited code is a component of the listed code |
| K0840 | E2387 | BCBST | Edited code is a component of the listed code |
| K0840 | E2388 | BCBST | Edited code is a component of the listed code |
| K0840 | E2389 | BCBST | Edited code is a component of the listed code |
| K0840 | E2390 | BCBST | Edited code is a component of the listed code |
| K0840 | E2391 | BCBST | Edited code is a component of the listed code |
| K0840 | E2392 | BCBST | Edited code is a component of the listed code |
| K0840 | E2393 | BCBST | Edited code is a component of the listed code |
| K0840 | E2394 | BCBST | Edited code is a component of the listed code |
| K0840 | E2395 | BCBST | Edited code is a component of the listed code |
| K0840 | E2396 | BCBST | Edited code is a component of the listed code |
| K0840 | K0015 | BCBST | Edited code is a component of the listed code |
| K0840 | K0017 | BCBST | Edited code is a component of the listed code |
| K0840 | K0018 | BCBST | Edited code is a component of the listed code |
| K0840 | K0019 | BCBST | Edited code is a component of the listed code |
| K0840 | K0020 | BCBST | Edited code is a component of the listed code |
| K0840 | K0037 | BCBST | Edited code is a component of the listed code |
| K0840 | K0040 | BCBST | Edited code is a component of the listed code |
| K0840 | K0041 | BCBST | Edited code is a component of the listed code |
| K0840 | K0042 | BCBST | Edited code is a component of the listed code |
| K0840 | K0043 | BCBST | Edited code is a component of the listed code |
| K0840 | K0044 | BCBST | Edited code is a component of the listed code |
| K0840 | K0045 | BCBST | Edited code is a component of the listed code |
| K0840 | K0046 | BCBST | Edited code is a component of the listed code |
| K0840 | K0047 | BCBST | Edited code is a component of the listed code |
| K0840 | K0051 | BCBST | Edited code is a component of the listed code |
| K0840 | K0052 | BCBST | Edited code is a component of the listed code |
| K0840 | K0098 | BCBST | Edited code is a component of the listed code |
| K0841 | E0971 | BCBST | Edited code is a component of the listed code |
| K0841 | E0978 | BCBST | Edited code is a component of the listed code |
| K0841 | E0981 | BCBST | Edited code is a component of the listed code |
| K0841 | E0982 | BCBST | Edited code is a component of the listed code |
| K0841 | E0995 | BCBST | Edited code is a component of the listed code |
| K0841 | E1225 | BCBST | Edited code is a component of the listed code |
| K0841 | E2357 | BCBST | Edited code is a component of the listed code |
| K0841 | E2366 | BCBST | Edited code is a component of the listed code |
| K0841 | E2368 | BCBST | Edited code is a component of the listed code |
| K0841 | E2369 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0841 | E2370 | BCBST | Edited code is a component of the listed code |
| K0841 | E2374 | BCBST | Edited code is a component of the listed code |
| K0841 | E2375 | BCBST | Edited code is a component of the listed code |
| K0841 | E2376 | BCBST | Edited code is a component of the listed code |
| K0841 | E2381 | BCBST | Edited code is a component of the listed code |
| K0841 | E2382 | BCBST | Edited code is a component of the listed code |
| K0841 | E2383 | BCBST | Edited code is a component of the listed code |
| K0841 | E2384 | BCBST | Edited code is a component of the listed code |
| K0841 | E2385 | BCBST | Edited code is a component of the listed code |
| K0841 | E2386 | BCBST | Edited code is a component of the listed code |
| K0841 | E2387 | BCBST | Edited code is a component of the listed code |
| K0841 | E2388 | BCBST | Edited code is a component of the listed code |
| K0841 | E2389 | BCBST | Edited code is a component of the listed code |
| K0841 | E2390 | BCBST | Edited code is a component of the listed code |
| K0841 | E2391 | BCBST | Edited code is a component of the listed code |
| K0841 | E2392 | BCBST | Edited code is a component of the listed code |
| K0841 | E2393 | BCBST | Edited code is a component of the listed code |
| K0841 | E2394 | BCBST | Edited code is a component of the listed code |
| K0841 | E2395 | BCBST | Edited code is a component of the listed code |
| K0841 | E2396 | BCBST | Edited code is a component of the listed code |
| K0841 | K0015 | BCBST | Edited code is a component of the listed code |
| K0841 | K0017 | BCBST | Edited code is a component of the listed code |
| K0841 | K0018 | BCBST | Edited code is a component of the listed code |
| K0841 | K0019 | BCBST | Edited code is a component of the listed code |
| K0841 | K0020 | BCBST | Edited code is a component of the listed code |
| K0841 | K0037 | BCBST | Edited code is a component of the listed code |
| K0841 | K0040 | BCBST | Edited code is a component of the listed code |
| K0841 | K0041 | BCBST | Edited code is a component of the listed code |
| K0841 | K0042 | BCBST | Edited code is a component of the listed code |
| K0841 | K0043 | BCBST | Edited code is a component of the listed code |
| K0841 | K0044 | BCBST | Edited code is a component of the listed code |
| K0841 | K0045 | BCBST | Edited code is a component of the listed code |
| K0841 | K0046 | BCBST | Edited code is a component of the listed code |
| K0841 | K0047 | BCBST | Edited code is a component of the listed code |
| K0841 | K0051 | BCBST | Edited code is a component of the listed code |
| K0841 | K0052 | BCBST | Edited code is a component of the listed code |
| K0841 | K0098 | BCBST | Edited code is a component of the listed code |
| K0842 | E0971 | BCBST | Edited code is a component of the listed code |
| K0842 | E0978 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0842 | E0981 | BCBST | Edited code is a component of the listed code |
| K0842 | E0982 | BCBST | Edited code is a component of the listed code |
| K0842 | E0995 | BCBST | Edited code is a component of the listed code |
| K0842 | E1225 | BCBST | Edited code is a component of the listed code |
| K0842 | E2357 | BCBST | Edited code is a component of the listed code |
| K0842 | E2366 | BCBST | Edited code is a component of the listed code |
| K0842 | E2368 | BCBST | Edited code is a component of the listed code |
| K0842 | E2369 | BCBST | Edited code is a component of the listed code |
| K0842 | E2370 | BCBST | Edited code is a component of the listed code |
| K0842 | E2374 | BCBST | Edited code is a component of the listed code |
| K0842 | E2375 | BCBST | Edited code is a component of the listed code |
| K0842 | E2376 | BCBST | Edited code is a component of the listed code |
| K0842 | E2381 | BCBST | Edited code is a component of the listed code |
| K0842 | E2382 | BCBST | Edited code is a component of the listed code |
| K0842 | E2383 | BCBST | Edited code is a component of the listed code |
| K0842 | E2384 | BCBST | Edited code is a component of the listed code |
| K0842 | E2385 | BCBST | Edited code is a component of the listed code |
| K0842 | E2386 | BCBST | Edited code is a component of the listed code |
| K0842 | E2387 | BCBST | Edited code is a component of the listed code |
| K0842 | E2388 | BCBST | Edited code is a component of the listed code |
| K0842 | E2389 | BCBST | Edited code is a component of the listed code |
| K0842 | E2390 | BCBST | Edited code is a component of the listed code |
| K0842 | E2391 | BCBST | Edited code is a component of the listed code |
| K0842 | E2392 | BCBST | Edited code is a component of the listed code |
| K0842 | E2393 | BCBST | Edited code is a component of the listed code |
| K0842 | E2394 | BCBST | Edited code is a component of the listed code |
| K0842 | E2395 | BCBST | Edited code is a component of the listed code |
| K0842 | E2396 | BCBST | Edited code is a component of the listed code |
| K0842 | K0015 | BCBST | Edited code is a component of the listed code |
| K0842 | K0017 | BCBST | Edited code is a component of the listed code |
| K0842 | K0018 | BCBST | Edited code is a component of the listed code |
| K0842 | K0019 | BCBST | Edited code is a component of the listed code |
| K0842 | K0020 | BCBST | Edited code is a component of the listed code |
| K0842 | K0037 | BCBST | Edited code is a component of the listed code |
| K0842 | K0040 | BCBST | Edited code is a component of the listed code |
| K0842 | K0041 | BCBST | Edited code is a component of the listed code |
| K0842 | K0042 | BCBST | Edited code is a component of the listed code |
| K0842 | K0043 | BCBST | Edited code is a component of the listed code |
| K0842 | K0044 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0842 | K0045 | BCBST | Edited code is a component of the listed code |
| K0842 | K0046 | BCBST | Edited code is a component of the listed code |
| K0842 | K0047 | BCBST | Edited code is a component of the listed code |
| K0842 | K0051 | BCBST | Edited code is a component of the listed code |
| K0842 | K0052 | BCBST | Edited code is a component of the listed code |
| K0842 | K0098 | BCBST | Edited code is a component of the listed code |
| K0843 | E0971 | BCBST | Edited code is a component of the listed code |
| K0843 | E0978 | BCBST | Edited code is a component of the listed code |
| K0843 | E0981 | BCBST | Edited code is a component of the listed code |
| K0843 | E0982 | BCBST | Edited code is a component of the listed code |
| K0843 | E0995 | BCBST | Edited code is a component of the listed code |
| K0843 | E1225 | BCBST | Edited code is a component of the listed code |
| K0843 | E2357 | BCBST | Edited code is a component of the listed code |
| K0843 | E2366 | BCBST | Edited code is a component of the listed code |
| K0843 | E2368 | BCBST | Edited code is a component of the listed code |
| K0843 | E2369 | BCBST | Edited code is a component of the listed code |
| K0843 | E2370 | BCBST | Edited code is a component of the listed code |
| K0843 | E2374 | BCBST | Edited code is a component of the listed code |
| K0843 | E2375 | BCBST | Edited code is a component of the listed code |
| K0843 | E2376 | BCBST | Edited code is a component of the listed code |
| K0843 | E2381 | BCBST | Edited code is a component of the listed code |
| K0843 | E2382 | BCBST | Edited code is a component of the listed code |
| K0843 | E2383 | BCBST | Edited code is a component of the listed code |
| K0843 | E2384 | BCBST | Edited code is a component of the listed code |
| K0843 | E2385 | BCBST | Edited code is a component of the listed code |
| K0843 | E2386 | BCBST | Edited code is a component of the listed code |
| K0843 | E2387 | BCBST | Edited code is a component of the listed code |
| K0843 | E2388 | BCBST | Edited code is a component of the listed code |
| K0843 | E2389 | BCBST | Edited code is a component of the listed code |
| K0843 | E2390 | BCBST | Edited code is a component of the listed code |
| K0843 | E2391 | BCBST | Edited code is a component of the listed code |
| K0843 | E2392 | BCBST | Edited code is a component of the listed code |
| K0843 | E2393 | BCBST | Edited code is a component of the listed code |
| K0843 | E2394 | BCBST | Edited code is a component of the listed code |
| K0843 | E2395 | BCBST | Edited code is a component of the listed code |
| K0843 | E2396 | BCBST | Edited code is a component of the listed code |
| K0843 | K0015 | BCBST | Edited code is a component of the listed code |
| K0843 | K0017 | BCBST | Edited code is a component of the listed code |
| K0843 | K0018 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0843 | K0019 | BCBST | Edited code is a component of the listed code |
| K0843 | K0020 | BCBST | Edited code is a component of the listed code |
| K0843 | K0037 | BCBST | Edited code is a component of the listed code |
| K0843 | K0040 | BCBST | Edited code is a component of the listed code |
| K0843 | K0041 | BCBST | Edited code is a component of the listed code |
| K0843 | K0042 | BCBST | Edited code is a component of the listed code |
| K0843 | K0043 | BCBST | Edited code is a component of the listed code |
| K0843 | K0044 | BCBST | Edited code is a component of the listed code |
| K0843 | K0045 | BCBST | Edited code is a component of the listed code |
| K0843 | K0046 | BCBST | Edited code is a component of the listed code |
| K0843 | K0047 | BCBST | Edited code is a component of the listed code |
| K0843 | K0051 | BCBST | Edited code is a component of the listed code |
| K0843 | K0052 | BCBST | Edited code is a component of the listed code |
| K0843 | K0098 | BCBST | Edited code is a component of the listed code |
| K0848 | E0971 | BCBST | Edited code is a component of the listed code |
| K0848 | E0978 | BCBST | Edited code is a component of the listed code |
| K0848 | E0981 | BCBST | Edited code is a component of the listed code |
| K0848 | E0982 | BCBST | Edited code is a component of the listed code |
| K0848 | E0995 | BCBST | Edited code is a component of the listed code |
| K0848 | E1225 | BCBST | Edited code is a component of the listed code |
| K0848 | E2357 | BCBST | Edited code is a component of the listed code |
| K0848 | E2366 | BCBST | Edited code is a component of the listed code |
| K0848 | E2368 | BCBST | Edited code is a component of the listed code |
| K0848 | E2369 | BCBST | Edited code is a component of the listed code |
| K0848 | E2370 | BCBST | Edited code is a component of the listed code |
| K0848 | E2374 | BCBST | Edited code is a component of the listed code |
| K0848 | E2375 | BCBST | Edited code is a component of the listed code |
| K0848 | E2376 | BCBST | Edited code is a component of the listed code |
| K0848 | E2381 | BCBST | Edited code is a component of the listed code |
| K0848 | E2382 | BCBST | Edited code is a component of the listed code |
| K0848 | E2383 | BCBST | Edited code is a component of the listed code |
| K0848 | E2384 | BCBST | Edited code is a component of the listed code |
| K0848 | E2385 | BCBST | Edited code is a component of the listed code |
| K0848 | E2386 | BCBST | Edited code is a component of the listed code |
| K0848 | E2387 | BCBST | Edited code is a component of the listed code |
| K0848 | E2388 | BCBST | Edited code is a component of the listed code |
| K0848 | E2389 | BCBST | Edited code is a component of the listed code |
| K0848 | E2390 | BCBST | Edited code is a component of the listed code |
| K0848 | E2391 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0848 | E2392 | BCBST | Edited code is a component of the listed code |
| K0848 | E2393 | BCBST | Edited code is a component of the listed code |
| K0848 | E2394 | BCBST | Edited code is a component of the listed code |
| K0848 | E2395 | BCBST | Edited code is a component of the listed code |
| K0848 | E2396 | BCBST | Edited code is a component of the listed code |
| K0848 | K0015 | BCBST | Edited code is a component of the listed code |
| K0848 | K0017 | BCBST | Edited code is a component of the listed code |
| K0848 | K0018 | BCBST | Edited code is a component of the listed code |
| K0848 | K0019 | BCBST | Edited code is a component of the listed code |
| K0848 | K0020 | BCBST | Edited code is a component of the listed code |
| K0848 | K0037 | BCBST | Edited code is a component of the listed code |
| K0848 | K0041 | BCBST | Edited code is a component of the listed code |
| K0848 | K0042 | BCBST | Edited code is a component of the listed code |
| K0848 | K0043 | BCBST | Edited code is a component of the listed code |
| K0848 | K0044 | BCBST | Edited code is a component of the listed code |
| K0848 | K0045 | BCBST | Edited code is a component of the listed code |
| K0848 | K0046 | BCBST | Edited code is a component of the listed code |
| K0848 | K0047 | BCBST | Edited code is a component of the listed code |
| K0848 | K0051 | BCBST | Edited code is a component of the listed code |
| K0848 | K0052 | BCBST | Edited code is a component of the listed code |
| K0848 | K0098 | BCBST | Edited code is a component of the listed code |
| K0849 | E0971 | BCBST | Edited code is a component of the listed code |
| K0849 | E0978 | BCBST | Edited code is a component of the listed code |
| K0849 | E0981 | BCBST | Edited code is a component of the listed code |
| K0849 | E0982 | BCBST | Edited code is a component of the listed code |
| K0849 | E0995 | BCBST | Edited code is a component of the listed code |
| K0849 | E1225 | BCBST | Edited code is a component of the listed code |
| K0849 | E2357 | BCBST | Edited code is a component of the listed code |
| K0849 | E2366 | BCBST | Edited code is a component of the listed code |
| K0849 | E2368 | BCBST | Edited code is a component of the listed code |
| K0849 | E2369 | BCBST | Edited code is a component of the listed code |
| K0849 | E2370 | BCBST | Edited code is a component of the listed code |
| K0849 | E2374 | BCBST | Edited code is a component of the listed code |
| K0849 | E2375 | BCBST | Edited code is a component of the listed code |
| K0849 | E2376 | BCBST | Edited code is a component of the listed code |
| K0849 | E2381 | BCBST | Edited code is a component of the listed code |
| K0849 | E2382 | BCBST | Edited code is a component of the listed code |
| K0849 | E2383 | BCBST | Edited code is a component of the listed code |
| K0849 | E2384 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0849 | E2385 | BCBST | Edited code is a component of the listed code |
| K0849 | E2386 | BCBST | Edited code is a component of the listed code |
| K0849 | E2387 | BCBST | Edited code is a component of the listed code |
| K0849 | E2388 | BCBST | Edited code is a component of the listed code |
| K0849 | E2389 | BCBST | Edited code is a component of the listed code |
| K0849 | E2390 | BCBST | Edited code is a component of the listed code |
| K0849 | E2391 | BCBST | Edited code is a component of the listed code |
| K0849 | E2392 | BCBST | Edited code is a component of the listed code |
| K0849 | E2393 | BCBST | Edited code is a component of the listed code |
| K0849 | E2394 | BCBST | Edited code is a component of the listed code |
| K0849 | E2395 | BCBST | Edited code is a component of the listed code |
| K0849 | E2396 | BCBST | Edited code is a component of the listed code |
| K0849 | K0015 | BCBST | Edited code is a component of the listed code |
| K0849 | K0017 | BCBST | Edited code is a component of the listed code |
| K0849 | K0018 | BCBST | Edited code is a component of the listed code |
| K0849 | K0019 | BCBST | Edited code is a component of the listed code |
| K0849 | K0020 | BCBST | Edited code is a component of the listed code |
| K0849 | K0037 | BCBST | Edited code is a component of the listed code |
| K0849 | K0041 | BCBST | Edited code is a component of the listed code |
| K0849 | K0042 | BCBST | Edited code is a component of the listed code |
| K0849 | K0043 | BCBST | Edited code is a component of the listed code |
| K0849 | K0044 | BCBST | Edited code is a component of the listed code |
| K0849 | K0045 | BCBST | Edited code is a component of the listed code |
| K0849 | K0046 | BCBST | Edited code is a component of the listed code |
| K0849 | K0047 | BCBST | Edited code is a component of the listed code |
| K0849 | K0051 | BCBST | Edited code is a component of the listed code |
| K0849 | K0052 | BCBST | Edited code is a component of the listed code |
| K0849 | K0098 | BCBST | Edited code is a component of the listed code |
| K0850 | E0971 | BCBST | Edited code is a component of the listed code |
| K0850 | E0978 | BCBST | Edited code is a component of the listed code |
| K0850 | E0981 | BCBST | Edited code is a component of the listed code |
| K0850 | E0982 | BCBST | Edited code is a component of the listed code |
| K0850 | E0995 | BCBST | Edited code is a component of the listed code |
| K0850 | E1225 | BCBST | Edited code is a component of the listed code |
| K0850 | E2357 | BCBST | Edited code is a component of the listed code |
| K0850 | E2366 | BCBST | Edited code is a component of the listed code |
| K0850 | E2368 | BCBST | Edited code is a component of the listed code |
| K0850 | E2369 | BCBST | Edited code is a component of the listed code |
| K0850 | E2370 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0850 | E2374 | BCBST | Edited code is a component of the listed code |
| K0850 | E2375 | BCBST | Edited code is a component of the listed code |
| K0850 | E2376 | BCBST | Edited code is a component of the listed code |
| K0850 | E2381 | BCBST | Edited code is a component of the listed code |
| K0850 | E2382 | BCBST | Edited code is a component of the listed code |
| K0850 | E2383 | BCBST | Edited code is a component of the listed code |
| K0850 | E2384 | BCBST | Edited code is a component of the listed code |
| K0850 | E2385 | BCBST | Edited code is a component of the listed code |
| K0850 | E2386 | BCBST | Edited code is a component of the listed code |
| K0850 | E2387 | BCBST | Edited code is a component of the listed code |
| K0850 | E2388 | BCBST | Edited code is a component of the listed code |
| K0850 | E2389 | BCBST | Edited code is a component of the listed code |
| K0850 | E2390 | BCBST | Edited code is a component of the listed code |
| K0850 | E2391 | BCBST | Edited code is a component of the listed code |
| K0850 | E2392 | BCBST | Edited code is a component of the listed code |
| K0850 | E2393 | BCBST | Edited code is a component of the listed code |
| K0850 | E2394 | BCBST | Edited code is a component of the listed code |
| K0850 | E2395 | BCBST | Edited code is a component of the listed code |
| K0850 | E2396 | BCBST | Edited code is a component of the listed code |
| K0850 | K0015 | BCBST | Edited code is a component of the listed code |
| K0850 | K0017 | BCBST | Edited code is a component of the listed code |
| K0850 | K0018 | BCBST | Edited code is a component of the listed code |
| K0850 | K0019 | BCBST | Edited code is a component of the listed code |
| K0850 | K0020 | BCBST | Edited code is a component of the listed code |
| K0850 | K0037 | BCBST | Edited code is a component of the listed code |
| K0850 | K0041 | BCBST | Edited code is a component of the listed code |
| K0850 | K0042 | BCBST | Edited code is a component of the listed code |
| K0850 | K0043 | BCBST | Edited code is a component of the listed code |
| K0850 | K0044 | BCBST | Edited code is a component of the listed code |
| K0850 | K0045 | BCBST | Edited code is a component of the listed code |
| K0850 | K0046 | BCBST | Edited code is a component of the listed code |
| K0850 | K0047 | BCBST | Edited code is a component of the listed code |
| K0850 | K0051 | BCBST | Edited code is a component of the listed code |
| K0850 | K0052 | BCBST | Edited code is a component of the listed code |
| K0850 | K0098 | BCBST | Edited code is a component of the listed code |
| K0851 | E0971 | BCBST | Edited code is a component of the listed code |
| K0851 | E0978 | BCBST | Edited code is a component of the listed code |
| K0851 | E0981 | BCBST | Edited code is a component of the listed code |
| K0851 | E0982 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0851 | E0995 | BCBST | Edited code is a component of the listed code |
| K0851 | E1225 | BCBST | Edited code is a component of the listed code |
| K0851 | E2357 | BCBST | Edited code is a component of the listed code |
| K0851 | E2366 | BCBST | Edited code is a component of the listed code |
| K0851 | E2368 | BCBST | Edited code is a component of the listed code |
| K0851 | E2369 | BCBST | Edited code is a component of the listed code |
| K0851 | E2370 | BCBST | Edited code is a component of the listed code |
| K0851 | E2374 | BCBST | Edited code is a component of the listed code |
| K0851 | E2375 | BCBST | Edited code is a component of the listed code |
| K0851 | E2376 | BCBST | Edited code is a component of the listed code |
| K0851 | E2381 | BCBST | Edited code is a component of the listed code |
| K0851 | E2382 | BCBST | Edited code is a component of the listed code |
| K0851 | E2383 | BCBST | Edited code is a component of the listed code |
| K0851 | E2384 | BCBST | Edited code is a component of the listed code |
| K0851 | E2385 | BCBST | Edited code is a component of the listed code |
| K0851 | E2386 | BCBST | Edited code is a component of the listed code |
| K0851 | E2387 | BCBST | Edited code is a component of the listed code |
| K0851 | E2388 | BCBST | Edited code is a component of the listed code |
| K0851 | E2389 | BCBST | Edited code is a component of the listed code |
| K0851 | E2390 | BCBST | Edited code is a component of the listed code |
| K0851 | E2391 | BCBST | Edited code is a component of the listed code |
| K0851 | E2392 | BCBST | Edited code is a component of the listed code |
| K0851 | E2393 | BCBST | Edited code is a component of the listed code |
| K0851 | E2394 | BCBST | Edited code is a component of the listed code |
| K0851 | E2395 | BCBST | Edited code is a component of the listed code |
| K0851 | E2396 | BCBST | Edited code is a component of the listed code |
| K0851 | K0015 | BCBST | Edited code is a component of the listed code |
| K0851 | K0017 | BCBST | Edited code is a component of the listed code |
| K0851 | K0018 | BCBST | Edited code is a component of the listed code |
| K0851 | K0019 | BCBST | Edited code is a component of the listed code |
| K0851 | K0020 | BCBST | Edited code is a component of the listed code |
| K0851 | K0037 | BCBST | Edited code is a component of the listed code |
| K0851 | K0041 | BCBST | Edited code is a component of the listed code |
| K0851 | K0042 | BCBST | Edited code is a component of the listed code |
| K0851 | K0043 | BCBST | Edited code is a component of the listed code |
| K0851 | K0044 | BCBST | Edited code is a component of the listed code |
| K0851 | K0045 | BCBST | Edited code is a component of the listed code |
| K0851 | K0046 | BCBST | Edited code is a component of the listed code |
| K0851 | K0047 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0851 | K0051 | BCBST | Edited code is a component of the listed code |
| K0851 | K0052 | BCBST | Edited code is a component of the listed code |
| K0851 | K0098 | BCBST | Edited code is a component of the listed code |
| K0852 | E0971 | BCBST | Edited code is a component of the listed code |
| K0852 | E0978 | BCBST | Edited code is a component of the listed code |
| K0852 | E0981 | BCBST | Edited code is a component of the listed code |
| K0852 | E0982 | BCBST | Edited code is a component of the listed code |
| K0852 | E0995 | BCBST | Edited code is a component of the listed code |
| K0852 | E1225 | BCBST | Edited code is a component of the listed code |
| K0852 | E2357 | BCBST | Edited code is a component of the listed code |
| K0852 | E2366 | BCBST | Edited code is a component of the listed code |
| K0852 | E2368 | BCBST | Edited code is a component of the listed code |
| K0852 | E2369 | BCBST | Edited code is a component of the listed code |
| K0852 | E2370 | BCBST | Edited code is a component of the listed code |
| K0852 | E2374 | BCBST | Edited code is a component of the listed code |
| K0852 | E2375 | BCBST | Edited code is a component of the listed code |
| K0852 | E2376 | BCBST | Edited code is a component of the listed code |
| K0852 | E2381 | BCBST | Edited code is a component of the listed code |
| K0852 | E2382 | BCBST | Edited code is a component of the listed code |
| K0852 | E2383 | BCBST | Edited code is a component of the listed code |
| K0852 | E2384 | BCBST | Edited code is a component of the listed code |
| K0852 | E2385 | BCBST | Edited code is a component of the listed code |
| K0852 | E2386 | BCBST | Edited code is a component of the listed code |
| K0852 | E2387 | BCBST | Edited code is a component of the listed code |
| K0852 | E2388 | BCBST | Edited code is a component of the listed code |
| K0852 | E2389 | BCBST | Edited code is a component of the listed code |
| K0852 | E2390 | BCBST | Edited code is a component of the listed code |
| K0852 | E2391 | BCBST | Edited code is a component of the listed code |
| K0852 | E2392 | BCBST | Edited code is a component of the listed code |
| K0852 | E2393 | BCBST | Edited code is a component of the listed code |
| K0852 | E2394 | BCBST | Edited code is a component of the listed code |
| K0852 | E2395 | BCBST | Edited code is a component of the listed code |
| K0852 | E2396 | BCBST | Edited code is a component of the listed code |
| K0852 | K0015 | BCBST | Edited code is a component of the listed code |
| K0852 | K0017 | BCBST | Edited code is a component of the listed code |
| K0852 | K0018 | BCBST | Edited code is a component of the listed code |
| K0852 | K0019 | BCBST | Edited code is a component of the listed code |
| K0852 | K0020 | BCBST | Edited code is a component of the listed code |
| K0852 | K0037 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0852 | K0041 | BCBST | Edited code is a component of the listed code |
| K0852 | K0042 | BCBST | Edited code is a component of the listed code |
| K0852 | K0043 | BCBST | Edited code is a component of the listed code |
| K0852 | K0044 | BCBST | Edited code is a component of the listed code |
| K0852 | K0045 | BCBST | Edited code is a component of the listed code |
| K0852 | K0046 | BCBST | Edited code is a component of the listed code |
| K0852 | K0047 | BCBST | Edited code is a component of the listed code |
| K0852 | K0051 | BCBST | Edited code is a component of the listed code |
| K0852 | K0052 | BCBST | Edited code is a component of the listed code |
| K0852 | K0098 | BCBST | Edited code is a component of the listed code |
| K0853 | E0971 | BCBST | Edited code is a component of the listed code |
| K0853 | E0978 | BCBST | Edited code is a component of the listed code |
| K0853 | E0981 | BCBST | Edited code is a component of the listed code |
| K0853 | E0982 | BCBST | Edited code is a component of the listed code |
| K0853 | E0995 | BCBST | Edited code is a component of the listed code |
| K0853 | E1225 | BCBST | Edited code is a component of the listed code |
| K0853 | E2357 | BCBST | Edited code is a component of the listed code |
| K0853 | E2366 | BCBST | Edited code is a component of the listed code |
| K0853 | E2368 | BCBST | Edited code is a component of the listed code |
| K0853 | E2369 | BCBST | Edited code is a component of the listed code |
| K0853 | E2370 | BCBST | Edited code is a component of the listed code |
| K0853 | E2374 | BCBST | Edited code is a component of the listed code |
| K0853 | E2375 | BCBST | Edited code is a component of the listed code |
| K0853 | E2376 | BCBST | Edited code is a component of the listed code |
| K0853 | E2381 | BCBST | Edited code is a component of the listed code |
| K0853 | E2382 | BCBST | Edited code is a component of the listed code |
| K0853 | E2383 | BCBST | Edited code is a component of the listed code |
| K0853 | E2384 | BCBST | Edited code is a component of the listed code |
| K0853 | E2385 | BCBST | Edited code is a component of the listed code |
| K0853 | E2386 | BCBST | Edited code is a component of the listed code |
| K0853 | E2387 | BCBST | Edited code is a component of the listed code |
| K0853 | E2388 | BCBST | Edited code is a component of the listed code |
| K0853 | E2389 | BCBST | Edited code is a component of the listed code |
| K0853 | E2390 | BCBST | Edited code is a component of the listed code |
| K0853 | E2391 | BCBST | Edited code is a component of the listed code |
| K0853 | E2392 | BCBST | Edited code is a component of the listed code |
| K0853 | E2393 | BCBST | Edited code is a component of the listed code |
| K0853 | E2394 | BCBST | Edited code is a component of the listed code |
| K0853 | E2395 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0853 | E2396 | BCBST | Edited code is a component of the listed code |
| K0853 | K0015 | BCBST | Edited code is a component of the listed code |
| K0853 | K0017 | BCBST | Edited code is a component of the listed code |
| K0853 | K0018 | BCBST | Edited code is a component of the listed code |
| K0853 | K0019 | BCBST | Edited code is a component of the listed code |
| K0853 | K0020 | BCBST | Edited code is a component of the listed code |
| K0853 | K0037 | BCBST | Edited code is a component of the listed code |
| K0853 | K0041 | BCBST | Edited code is a component of the listed code |
| K0853 | K0042 | BCBST | Edited code is a component of the listed code |
| K0853 | K0043 | BCBST | Edited code is a component of the listed code |
| K0853 | K0044 | BCBST | Edited code is a component of the listed code |
| K0853 | K0045 | BCBST | Edited code is a component of the listed code |
| K0853 | K0046 | BCBST | Edited code is a component of the listed code |
| K0853 | K0047 | BCBST | Edited code is a component of the listed code |
| K0853 | K0051 | BCBST | Edited code is a component of the listed code |
| K0853 | K0052 | BCBST | Edited code is a component of the listed code |
| K0853 | K0098 | BCBST | Edited code is a component of the listed code |
| K0854 | E0971 | BCBST | Edited code is a component of the listed code |
| K0854 | E0978 | BCBST | Edited code is a component of the listed code |
| K0854 | E0981 | BCBST | Edited code is a component of the listed code |
| K0854 | E0982 | BCBST | Edited code is a component of the listed code |
| K0854 | E0995 | BCBST | Edited code is a component of the listed code |
| K0854 | E1225 | BCBST | Edited code is a component of the listed code |
| K0854 | E2357 | BCBST | Edited code is a component of the listed code |
| K0854 | E2366 | BCBST | Edited code is a component of the listed code |
| K0854 | E2368 | BCBST | Edited code is a component of the listed code |
| K0854 | E2369 | BCBST | Edited code is a component of the listed code |
| K0854 | E2370 | BCBST | Edited code is a component of the listed code |
| K0854 | E2374 | BCBST | Edited code is a component of the listed code |
| K0854 | E2375 | BCBST | Edited code is a component of the listed code |
| K0854 | E2376 | BCBST | Edited code is a component of the listed code |
| K0854 | E2381 | BCBST | Edited code is a component of the listed code |
| K0854 | E2382 | BCBST | Edited code is a component of the listed code |
| K0854 | E2383 | BCBST | Edited code is a component of the listed code |
| K0854 | E2384 | BCBST | Edited code is a component of the listed code |
| K0854 | E2385 | BCBST | Edited code is a component of the listed code |
| K0854 | E2386 | BCBST | Edited code is a component of the listed code |
| K0854 | E2387 | BCBST | Edited code is a component of the listed code |
| K0854 | E2388 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0854 | E2389 | BCBST | Edited code is a component of the listed code |
| K0854 | E2390 | BCBST | Edited code is a component of the listed code |
| K0854 | E2391 | BCBST | Edited code is a component of the listed code |
| K0854 | E2392 | BCBST | Edited code is a component of the listed code |
| K0854 | E2393 | BCBST | Edited code is a component of the listed code |
| K0854 | E2394 | BCBST | Edited code is a component of the listed code |
| K0854 | E2395 | BCBST | Edited code is a component of the listed code |
| K0854 | E2396 | BCBST | Edited code is a component of the listed code |
| K0854 | K0015 | BCBST | Edited code is a component of the listed code |
| K0854 | K0017 | BCBST | Edited code is a component of the listed code |
| K0854 | K0018 | BCBST | Edited code is a component of the listed code |
| K0854 | K0019 | BCBST | Edited code is a component of the listed code |
| K0854 | K0020 | BCBST | Edited code is a component of the listed code |
| K0854 | K0037 | BCBST | Edited code is a component of the listed code |
| K0854 | K0041 | BCBST | Edited code is a component of the listed code |
| K0854 | K0042 | BCBST | Edited code is a component of the listed code |
| K0854 | K0043 | BCBST | Edited code is a component of the listed code |
| K0854 | K0044 | BCBST | Edited code is a component of the listed code |
| K0854 | K0045 | BCBST | Edited code is a component of the listed code |
| K0854 | K0046 | BCBST | Edited code is a component of the listed code |
| K0854 | K0047 | BCBST | Edited code is a component of the listed code |
| K0854 | K0051 | BCBST | Edited code is a component of the listed code |
| K0854 | K0052 | BCBST | Edited code is a component of the listed code |
| K0854 | K0098 | BCBST | Edited code is a component of the listed code |
| K0855 | E0971 | BCBST | Edited code is a component of the listed code |
| K0855 | E0978 | BCBST | Edited code is a component of the listed code |
| K0855 | E0981 | BCBST | Edited code is a component of the listed code |
| K0855 | E0982 | BCBST | Edited code is a component of the listed code |
| K0855 | E0995 | BCBST | Edited code is a component of the listed code |
| K0855 | E1225 | BCBST | Edited code is a component of the listed code |
| K0855 | E2357 | BCBST | Edited code is a component of the listed code |
| K0855 | E2366 | BCBST | Edited code is a component of the listed code |
| K0855 | E2368 | BCBST | Edited code is a component of the listed code |
| K0855 | E2369 | BCBST | Edited code is a component of the listed code |
| K0855 | E2370 | BCBST | Edited code is a component of the listed code |
| K0855 | E2374 | BCBST | Edited code is a component of the listed code |
| K0855 | E2375 | BCBST | Edited code is a component of the listed code |
| K0855 | E2376 | BCBST | Edited code is a component of the listed code |
| K0855 | E2381 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0855 | E2382 | BCBST | Edited code is a component of the listed code |
| K0855 | E2383 | BCBST | Edited code is a component of the listed code |
| K0855 | E2384 | BCBST | Edited code is a component of the listed code |
| K0855 | E2385 | BCBST | Edited code is a component of the listed code |
| K0855 | E2386 | BCBST | Edited code is a component of the listed code |
| K0855 | E2387 | BCBST | Edited code is a component of the listed code |
| K0855 | E2388 | BCBST | Edited code is a component of the listed code |
| K0855 | E2389 | BCBST | Edited code is a component of the listed code |
| K0855 | E2390 | BCBST | Edited code is a component of the listed code |
| K0855 | E2391 | BCBST | Edited code is a component of the listed code |
| K0855 | E2392 | BCBST | Edited code is a component of the listed code |
| K0855 | E2393 | BCBST | Edited code is a component of the listed code |
| K0855 | E2394 | BCBST | Edited code is a component of the listed code |
| K0855 | E2395 | BCBST | Edited code is a component of the listed code |
| K0855 | E2396 | BCBST | Edited code is a component of the listed code |
| K0855 | K0015 | BCBST | Edited code is a component of the listed code |
| K0855 | K0017 | BCBST | Edited code is a component of the listed code |
| K0855 | K0018 | BCBST | Edited code is a component of the listed code |
| K0855 | K0019 | BCBST | Edited code is a component of the listed code |
| K0855 | K0020 | BCBST | Edited code is a component of the listed code |
| K0855 | K0037 | BCBST | Edited code is a component of the listed code |
| K0855 | K0041 | BCBST | Edited code is a component of the listed code |
| K0855 | K0042 | BCBST | Edited code is a component of the listed code |
| K0855 | K0043 | BCBST | Edited code is a component of the listed code |
| K0855 | K0044 | BCBST | Edited code is a component of the listed code |
| K0855 | K0045 | BCBST | Edited code is a component of the listed code |
| K0855 | K0046 | BCBST | Edited code is a component of the listed code |
| K0855 | K0047 | BCBST | Edited code is a component of the listed code |
| K0855 | K0051 | BCBST | Edited code is a component of the listed code |
| K0855 | K0052 | BCBST | Edited code is a component of the listed code |
| K0855 | K0098 | BCBST | Edited code is a component of the listed code |
| K0856 | E0971 | BCBST | Edited code is a component of the listed code |
| K0856 | E0978 | BCBST | Edited code is a component of the listed code |
| K0856 | E0981 | BCBST | Edited code is a component of the listed code |
| K0856 | E0982 | BCBST | Edited code is a component of the listed code |
| K0856 | E0995 | BCBST | Edited code is a component of the listed code |
| K0856 | E1225 | BCBST | Edited code is a component of the listed code |
| K0856 | E2357 | BCBST | Edited code is a component of the listed code |
| K0856 | E2366 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0856 | E2368 | BCBST | Edited code is a component of the listed code |
| K0856 | E2369 | BCBST | Edited code is a component of the listed code |
| K0856 | E2370 | BCBST | Edited code is a component of the listed code |
| K0856 | E2374 | BCBST | Edited code is a component of the listed code |
| K0856 | E2375 | BCBST | Edited code is a component of the listed code |
| K0856 | E2376 | BCBST | Edited code is a component of the listed code |
| K0856 | E2381 | BCBST | Edited code is a component of the listed code |
| K0856 | E2382 | BCBST | Edited code is a component of the listed code |
| K0856 | E2383 | BCBST | Edited code is a component of the listed code |
| K0856 | E2384 | BCBST | Edited code is a component of the listed code |
| K0856 | E2385 | BCBST | Edited code is a component of the listed code |
| K0856 | E2386 | BCBST | Edited code is a component of the listed code |
| K0856 | E2387 | BCBST | Edited code is a component of the listed code |
| K0856 | E2388 | BCBST | Edited code is a component of the listed code |
| K0856 | E2389 | BCBST | Edited code is a component of the listed code |
| K0856 | E2390 | BCBST | Edited code is a component of the listed code |
| K0856 | E2391 | BCBST | Edited code is a component of the listed code |
| K0856 | E2392 | BCBST | Edited code is a component of the listed code |
| K0856 | E2393 | BCBST | Edited code is a component of the listed code |
| K0856 | E2394 | BCBST | Edited code is a component of the listed code |
| K0856 | E2395 | BCBST | Edited code is a component of the listed code |
| K0856 | E2396 | BCBST | Edited code is a component of the listed code |
| K0856 | K0015 | BCBST | Edited code is a component of the listed code |
| K0856 | K0017 | BCBST | Edited code is a component of the listed code |
| K0856 | K0018 | BCBST | Edited code is a component of the listed code |
| K0856 | K0019 | BCBST | Edited code is a component of the listed code |
| K0856 | K0020 | BCBST | Edited code is a component of the listed code |
| K0856 | K0037 | BCBST | Edited code is a component of the listed code |
| K0856 | K0041 | BCBST | Edited code is a component of the listed code |
| K0856 | K0042 | BCBST | Edited code is a component of the listed code |
| K0856 | K0043 | BCBST | Edited code is a component of the listed code |
| K0856 | K0044 | BCBST | Edited code is a component of the listed code |
| K0856 | K0045 | BCBST | Edited code is a component of the listed code |
| K0856 | K0046 | BCBST | Edited code is a component of the listed code |
| K0856 | K0047 | BCBST | Edited code is a component of the listed code |
| K0856 | K0051 | BCBST | Edited code is a component of the listed code |
| K0856 | K0052 | BCBST | Edited code is a component of the listed code |
| K0856 | K0098 | BCBST | Edited code is a component of the listed code |
| K0857 | E0971 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0857 | E0978 | BCBST | Edited code is a component of the listed code |
| K0857 | E0981 | BCBST | Edited code is a component of the listed code |
| K0857 | E0982 | BCBST | Edited code is a component of the listed code |
| K0857 | E0995 | BCBST | Edited code is a component of the listed code |
| K0857 | E1225 | BCBST | Edited code is a component of the listed code |
| K0857 | E2357 | BCBST | Edited code is a component of the listed code |
| K0857 | E2366 | BCBST | Edited code is a component of the listed code |
| K0857 | E2368 | BCBST | Edited code is a component of the listed code |
| K0857 | E2369 | BCBST | Edited code is a component of the listed code |
| K0857 | E2370 | BCBST | Edited code is a component of the listed code |
| K0857 | E2374 | BCBST | Edited code is a component of the listed code |
| K0857 | E2375 | BCBST | Edited code is a component of the listed code |
| K0857 | E2376 | BCBST | Edited code is a component of the listed code |
| K0857 | E2381 | BCBST | Edited code is a component of the listed code |
| K0857 | E2382 | BCBST | Edited code is a component of the listed code |
| K0857 | E2383 | BCBST | Edited code is a component of the listed code |
| K0857 | E2384 | BCBST | Edited code is a component of the listed code |
| K0857 | E2385 | BCBST | Edited code is a component of the listed code |
| K0857 | E2386 | BCBST | Edited code is a component of the listed code |
| K0857 | E2387 | BCBST | Edited code is a component of the listed code |
| K0857 | E2388 | BCBST | Edited code is a component of the listed code |
| K0857 | E2389 | BCBST | Edited code is a component of the listed code |
| K0857 | E2390 | BCBST | Edited code is a component of the listed code |
| K0857 | E2391 | BCBST | Edited code is a component of the listed code |
| K0857 | E2392 | BCBST | Edited code is a component of the listed code |
| K0857 | E2393 | BCBST | Edited code is a component of the listed code |
| K0857 | E2394 | BCBST | Edited code is a component of the listed code |
| K0857 | E2395 | BCBST | Edited code is a component of the listed code |
| K0857 | E2396 | BCBST | Edited code is a component of the listed code |
| K0857 | K0015 | BCBST | Edited code is a component of the listed code |
| K0857 | K0017 | BCBST | Edited code is a component of the listed code |
| K0857 | K0018 | BCBST | Edited code is a component of the listed code |
| K0857 | K0019 | BCBST | Edited code is a component of the listed code |
| K0857 | K0020 | BCBST | Edited code is a component of the listed code |
| K0857 | K0037 | BCBST | Edited code is a component of the listed code |
| K0857 | K0041 | BCBST | Edited code is a component of the listed code |
| K0857 | K0042 | BCBST | Edited code is a component of the listed code |
| K0857 | K0043 | BCBST | Edited code is a component of the listed code |
| K0857 | K0044 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0857 | K0045 | BCBST | Edited code is a component of the listed code |
| K0857 | K0046 | BCBST | Edited code is a component of the listed code |
| K0857 | K0047 | BCBST | Edited code is a component of the listed code |
| K0857 | K0051 | BCBST | Edited code is a component of the listed code |
| K0857 | K0052 | BCBST | Edited code is a component of the listed code |
| K0857 | K0098 | BCBST | Edited code is a component of the listed code |
| K0858 | E0971 | BCBST | Edited code is a component of the listed code |
| K0858 | E0978 | BCBST | Edited code is a component of the listed code |
| K0858 | E0981 | BCBST | Edited code is a component of the listed code |
| K0858 | E0982 | BCBST | Edited code is a component of the listed code |
| K0858 | E0995 | BCBST | Edited code is a component of the listed code |
| K0858 | E1225 | BCBST | Edited code is a component of the listed code |
| K0858 | E2357 | BCBST | Edited code is a component of the listed code |
| K0858 | E2366 | BCBST | Edited code is a component of the listed code |
| K0858 | E2368 | BCBST | Edited code is a component of the listed code |
| K0858 | E2369 | BCBST | Edited code is a component of the listed code |
| K0858 | E2370 | BCBST | Edited code is a component of the listed code |
| K0858 | E2374 | BCBST | Edited code is a component of the listed code |
| K0858 | E2375 | BCBST | Edited code is a component of the listed code |
| K0858 | E2376 | BCBST | Edited code is a component of the listed code |
| K0858 | E2381 | BCBST | Edited code is a component of the listed code |
| K0858 | E2382 | BCBST | Edited code is a component of the listed code |
| K0858 | E2383 | BCBST | Edited code is a component of the listed code |
| K0858 | E2384 | BCBST | Edited code is a component of the listed code |
| K0858 | E2385 | BCBST | Edited code is a component of the listed code |
| K0858 | E2386 | BCBST | Edited code is a component of the listed code |
| K0858 | E2387 | BCBST | Edited code is a component of the listed code |
| K0858 | E2388 | BCBST | Edited code is a component of the listed code |
| K0858 | E2389 | BCBST | Edited code is a component of the listed code |
| K0858 | E2390 | BCBST | Edited code is a component of the listed code |
| K0858 | E2391 | BCBST | Edited code is a component of the listed code |
| K0858 | E2392 | BCBST | Edited code is a component of the listed code |
| K0858 | E2393 | BCBST | Edited code is a component of the listed code |
| K0858 | E2394 | BCBST | Edited code is a component of the listed code |
| K0858 | E2395 | BCBST | Edited code is a component of the listed code |
| K0858 | E2396 | BCBST | Edited code is a component of the listed code |
| K0858 | K0015 | BCBST | Edited code is a component of the listed code |
| K0858 | K0017 | BCBST | Edited code is a component of the listed code |
| K0858 | K0018 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0858 | K0019 | BCBST | Edited code is a component of the listed code |
| K0858 | K0020 | BCBST | Edited code is a component of the listed code |
| K0858 | K0037 | BCBST | Edited code is a component of the listed code |
| K0858 | K0041 | BCBST | Edited code is a component of the listed code |
| K0858 | K0042 | BCBST | Edited code is a component of the listed code |
| K0858 | K0043 | BCBST | Edited code is a component of the listed code |
| K0858 | K0044 | BCBST | Edited code is a component of the listed code |
| K0858 | K0045 | BCBST | Edited code is a component of the listed code |
| K0858 | K0046 | BCBST | Edited code is a component of the listed code |
| K0858 | K0047 | BCBST | Edited code is a component of the listed code |
| K0858 | K0051 | BCBST | Edited code is a component of the listed code |
| K0858 | K0052 | BCBST | Edited code is a component of the listed code |
| K0858 | K0098 | BCBST | Edited code is a component of the listed code |
| K0859 | E0971 | BCBST | Edited code is a component of the listed code |
| K0859 | E0978 | BCBST | Edited code is a component of the listed code |
| K0859 | E0981 | BCBST | Edited code is a component of the listed code |
| K0859 | E0982 | BCBST | Edited code is a component of the listed code |
| K0859 | E0995 | BCBST | Edited code is a component of the listed code |
| K0859 | E1225 | BCBST | Edited code is a component of the listed code |
| K0859 | E2357 | BCBST | Edited code is a component of the listed code |
| K0859 | E2366 | BCBST | Edited code is a component of the listed code |
| K0859 | E2368 | BCBST | Edited code is a component of the listed code |
| K0859 | E2369 | BCBST | Edited code is a component of the listed code |
| K0859 | E2370 | BCBST | Edited code is a component of the listed code |
| K0859 | E2374 | BCBST | Edited code is a component of the listed code |
| K0859 | E2375 | BCBST | Edited code is a component of the listed code |
| K0859 | E2376 | BCBST | Edited code is a component of the listed code |
| K0859 | E2381 | BCBST | Edited code is a component of the listed code |
| K0859 | E2382 | BCBST | Edited code is a component of the listed code |
| K0859 | E2383 | BCBST | Edited code is a component of the listed code |
| K0859 | E2384 | BCBST | Edited code is a component of the listed code |
| K0859 | E2385 | BCBST | Edited code is a component of the listed code |
| K0859 | E2386 | BCBST | Edited code is a component of the listed code |
| K0859 | E2387 | BCBST | Edited code is a component of the listed code |
| K0859 | E2388 | BCBST | Edited code is a component of the listed code |
| K0859 | E2389 | BCBST | Edited code is a component of the listed code |
| K0859 | E2390 | BCBST | Edited code is a component of the listed code |
| K0859 | E2391 | BCBST | Edited code is a component of the listed code |
| K0859 | E2392 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0859 | E2393 | BCBST | Edited code is a component of the listed code |
| K0859 | E2394 | BCBST | Edited code is a component of the listed code |
| K0859 | E2395 | BCBST | Edited code is a component of the listed code |
| K0859 | E2396 | BCBST | Edited code is a component of the listed code |
| K0859 | K0015 | BCBST | Edited code is a component of the listed code |
| K0859 | K0017 | BCBST | Edited code is a component of the listed code |
| K0859 | K0018 | BCBST | Edited code is a component of the listed code |
| K0859 | K0019 | BCBST | Edited code is a component of the listed code |
| K0859 | K0020 | BCBST | Edited code is a component of the listed code |
| K0859 | K0037 | BCBST | Edited code is a component of the listed code |
| K0859 | K0041 | BCBST | Edited code is a component of the listed code |
| K0859 | K0042 | BCBST | Edited code is a component of the listed code |
| K0859 | K0043 | BCBST | Edited code is a component of the listed code |
| K0859 | K0044 | BCBST | Edited code is a component of the listed code |
| K0859 | K0045 | BCBST | Edited code is a component of the listed code |
| K0859 | K0046 | BCBST | Edited code is a component of the listed code |
| K0859 | K0047 | BCBST | Edited code is a component of the listed code |
| K0859 | K0051 | BCBST | Edited code is a component of the listed code |
| K0859 | K0052 | BCBST | Edited code is a component of the listed code |
| K0859 | K0098 | BCBST | Edited code is a component of the listed code |
| K0860 | E0971 | BCBST | Edited code is a component of the listed code |
| K0860 | E0978 | BCBST | Edited code is a component of the listed code |
| K0860 | E0981 | BCBST | Edited code is a component of the listed code |
| K0860 | E0982 | BCBST | Edited code is a component of the listed code |
| K0860 | E0995 | BCBST | Edited code is a component of the listed code |
| K0860 | E1225 | BCBST | Edited code is a component of the listed code |
| K0860 | E2357 | BCBST | Edited code is a component of the listed code |
| K0860 | E2366 | BCBST | Edited code is a component of the listed code |
| K0860 | E2368 | BCBST | Edited code is a component of the listed code |
| K0860 | E2369 | BCBST | Edited code is a component of the listed code |
| K0860 | E2370 | BCBST | Edited code is a component of the listed code |
| K0860 | E2374 | BCBST | Edited code is a component of the listed code |
| K0860 | E2375 | BCBST | Edited code is a component of the listed code |
| K0860 | E2376 | BCBST | Edited code is a component of the listed code |
| K0860 | E2381 | BCBST | Edited code is a component of the listed code |
| K0860 | E2382 | BCBST | Edited code is a component of the listed code |
| K0860 | E2383 | BCBST | Edited code is a component of the listed code |
| K0860 | E2384 | BCBST | Edited code is a component of the listed code |
| K0860 | E2385 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0860 | E2386 | BCBST | Edited code is a component of the listed code |
| K0860 | E2387 | BCBST | Edited code is a component of the listed code |
| K0860 | E2388 | BCBST | Edited code is a component of the listed code |
| K0860 | E2389 | BCBST | Edited code is a component of the listed code |
| K0860 | E2390 | BCBST | Edited code is a component of the listed code |
| K0860 | E2391 | BCBST | Edited code is a component of the listed code |
| K0860 | E2392 | BCBST | Edited code is a component of the listed code |
| K0860 | E2393 | BCBST | Edited code is a component of the listed code |
| K0860 | E2394 | BCBST | Edited code is a component of the listed code |
| K0860 | E2395 | BCBST | Edited code is a component of the listed code |
| K0860 | E2396 | BCBST | Edited code is a component of the listed code |
| K0860 | K0015 | BCBST | Edited code is a component of the listed code |
| K0860 | K0017 | BCBST | Edited code is a component of the listed code |
| K0860 | K0018 | BCBST | Edited code is a component of the listed code |
| K0860 | K0019 | BCBST | Edited code is a component of the listed code |
| K0860 | K0020 | BCBST | Edited code is a component of the listed code |
| K0860 | K0037 | BCBST | Edited code is a component of the listed code |
| K0860 | K0041 | BCBST | Edited code is a component of the listed code |
| K0860 | K0042 | BCBST | Edited code is a component of the listed code |
| K0860 | K0043 | BCBST | Edited code is a component of the listed code |
| K0860 | K0044 | BCBST | Edited code is a component of the listed code |
| K0860 | K0045 | BCBST | Edited code is a component of the listed code |
| K0860 | K0046 | BCBST | Edited code is a component of the listed code |
| K0860 | K0047 | BCBST | Edited code is a component of the listed code |
| K0860 | K0051 | BCBST | Edited code is a component of the listed code |
| K0860 | K0052 | BCBST | Edited code is a component of the listed code |
| K0860 | K0098 | BCBST | Edited code is a component of the listed code |
| K0861 | E0971 | BCBST | Edited code is a component of the listed code |
| K0861 | E0978 | BCBST | Edited code is a component of the listed code |
| K0861 | E0981 | BCBST | Edited code is a component of the listed code |
| K0861 | E0982 | BCBST | Edited code is a component of the listed code |
| K0861 | E0995 | BCBST | Edited code is a component of the listed code |
| K0861 | E1225 | BCBST | Edited code is a component of the listed code |
| K0861 | E2357 | BCBST | Edited code is a component of the listed code |
| K0861 | E2366 | BCBST | Edited code is a component of the listed code |
| K0861 | E2368 | BCBST | Edited code is a component of the listed code |
| K0861 | E2369 | BCBST | Edited code is a component of the listed code |
| K0861 | E2370 | BCBST | Edited code is a component of the listed code |
| K0861 | E2374 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0861 | E2375 | BCBST | Edited code is a component of the listed code |
| K0861 | E2376 | BCBST | Edited code is a component of the listed code |
| K0861 | E2381 | BCBST | Edited code is a component of the listed code |
| K0861 | E2382 | BCBST | Edited code is a component of the listed code |
| K0861 | E2383 | BCBST | Edited code is a component of the listed code |
| K0861 | E2384 | BCBST | Edited code is a component of the listed code |
| K0861 | E2385 | BCBST | Edited code is a component of the listed code |
| K0861 | E2386 | BCBST | Edited code is a component of the listed code |
| K0861 | E2387 | BCBST | Edited code is a component of the listed code |
| K0861 | E2388 | BCBST | Edited code is a component of the listed code |
| K0861 | E2389 | BCBST | Edited code is a component of the listed code |
| K0861 | E2390 | BCBST | Edited code is a component of the listed code |
| K0861 | E2391 | BCBST | Edited code is a component of the listed code |
| K0861 | E2392 | BCBST | Edited code is a component of the listed code |
| K0861 | E2393 | BCBST | Edited code is a component of the listed code |
| K0861 | E2394 | BCBST | Edited code is a component of the listed code |
| K0861 | E2395 | BCBST | Edited code is a component of the listed code |
| K0861 | E2396 | BCBST | Edited code is a component of the listed code |
| K0861 | K0015 | BCBST | Edited code is a component of the listed code |
| K0861 | K0017 | BCBST | Edited code is a component of the listed code |
| K0861 | K0018 | BCBST | Edited code is a component of the listed code |
| K0861 | K0019 | BCBST | Edited code is a component of the listed code |
| K0861 | K0020 | BCBST | Edited code is a component of the listed code |
| K0861 | K0037 | BCBST | Edited code is a component of the listed code |
| K0861 | K0041 | BCBST | Edited code is a component of the listed code |
| K0861 | K0042 | BCBST | Edited code is a component of the listed code |
| K0861 | K0043 | BCBST | Edited code is a component of the listed code |
| K0861 | K0044 | BCBST | Edited code is a component of the listed code |
| K0861 | K0045 | BCBST | Edited code is a component of the listed code |
| K0861 | K0046 | BCBST | Edited code is a component of the listed code |
| K0861 | K0047 | BCBST | Edited code is a component of the listed code |
| K0861 | K0051 | BCBST | Edited code is a component of the listed code |
| K0861 | K0052 | BCBST | Edited code is a component of the listed code |
| K0861 | K0098 | BCBST | Edited code is a component of the listed code |
| K0862 | E0971 | BCBST | Edited code is a component of the listed code |
| K0862 | E0978 | BCBST | Edited code is a component of the listed code |
| K0862 | E0981 | BCBST | Edited code is a component of the listed code |
| K0862 | E0982 | BCBST | Edited code is a component of the listed code |
| K0862 | E0995 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0862 | E1225 | BCBST | Edited code is a component of the listed code |
| K0862 | E2357 | BCBST | Edited code is a component of the listed code |
| K0862 | E2366 | BCBST | Edited code is a component of the listed code |
| K0862 | E2368 | BCBST | Edited code is a component of the listed code |
| K0862 | E2369 | BCBST | Edited code is a component of the listed code |
| K0862 | E2370 | BCBST | Edited code is a component of the listed code |
| K0862 | E2374 | BCBST | Edited code is a component of the listed code |
| K0862 | E2375 | BCBST | Edited code is a component of the listed code |
| K0862 | E2376 | BCBST | Edited code is a component of the listed code |
| K0862 | E2381 | BCBST | Edited code is a component of the listed code |
| K0862 | E2382 | BCBST | Edited code is a component of the listed code |
| K0862 | E2383 | BCBST | Edited code is a component of the listed code |
| K0862 | E2384 | BCBST | Edited code is a component of the listed code |
| K0862 | E2385 | BCBST | Edited code is a component of the listed code |
| K0862 | E2386 | BCBST | Edited code is a component of the listed code |
| K0862 | E2387 | BCBST | Edited code is a component of the listed code |
| K0862 | E2388 | BCBST | Edited code is a component of the listed code |
| K0862 | E2389 | BCBST | Edited code is a component of the listed code |
| K0862 | E2390 | BCBST | Edited code is a component of the listed code |
| K0862 | E2391 | BCBST | Edited code is a component of the listed code |
| K0862 | E2392 | BCBST | Edited code is a component of the listed code |
| K0862 | E2393 | BCBST | Edited code is a component of the listed code |
| K0862 | E2394 | BCBST | Edited code is a component of the listed code |
| K0862 | E2395 | BCBST | Edited code is a component of the listed code |
| K0862 | E2396 | BCBST | Edited code is a component of the listed code |
| K0862 | K0015 | BCBST | Edited code is a component of the listed code |
| K0862 | K0017 | BCBST | Edited code is a component of the listed code |
| K0862 | K0018 | BCBST | Edited code is a component of the listed code |
| K0862 | K0019 | BCBST | Edited code is a component of the listed code |
| K0862 | K0020 | BCBST | Edited code is a component of the listed code |
| K0862 | K0037 | BCBST | Edited code is a component of the listed code |
| K0862 | K0041 | BCBST | Edited code is a component of the listed code |
| K0862 | K0042 | BCBST | Edited code is a component of the listed code |
| K0862 | K0043 | BCBST | Edited code is a component of the listed code |
| K0862 | K0044 | BCBST | Edited code is a component of the listed code |
| K0862 | K0045 | BCBST | Edited code is a component of the listed code |
| K0862 | K0046 | BCBST | Edited code is a component of the listed code |
| K0862 | K0047 | BCBST | Edited code is a component of the listed code |
| K0862 | K0051 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0862 | K0052 | BCBST | Edited code is a component of the listed code |
| K0862 | K0098 | BCBST | Edited code is a component of the listed code |
| K0863 | E0971 | BCBST | Edited code is a component of the listed code |
| K0863 | E0978 | BCBST | Edited code is a component of the listed code |
| K0863 | E0981 | BCBST | Edited code is a component of the listed code |
| K0863 | E0982 | BCBST | Edited code is a component of the listed code |
| K0863 | E0995 | BCBST | Edited code is a component of the listed code |
| K0863 | E1225 | BCBST | Edited code is a component of the listed code |
| K0863 | E2357 | BCBST | Edited code is a component of the listed code |
| K0863 | E2366 | BCBST | Edited code is a component of the listed code |
| K0863 | E2368 | BCBST | Edited code is a component of the listed code |
| K0863 | E2369 | BCBST | Edited code is a component of the listed code |
| K0863 | E2370 | BCBST | Edited code is a component of the listed code |
| K0863 | E2374 | BCBST | Edited code is a component of the listed code |
| K0863 | E2375 | BCBST | Edited code is a component of the listed code |
| K0863 | E2376 | BCBST | Edited code is a component of the listed code |
| K0863 | E2381 | BCBST | Edited code is a component of the listed code |
| K0863 | E2382 | BCBST | Edited code is a component of the listed code |
| K0863 | E2383 | BCBST | Edited code is a component of the listed code |
| K0863 | E2384 | BCBST | Edited code is a component of the listed code |
| K0863 | E2385 | BCBST | Edited code is a component of the listed code |
| K0863 | E2386 | BCBST | Edited code is a component of the listed code |
| K0863 | E2387 | BCBST | Edited code is a component of the listed code |
| K0863 | E2388 | BCBST | Edited code is a component of the listed code |
| K0863 | E2389 | BCBST | Edited code is a component of the listed code |
| K0863 | E2390 | BCBST | Edited code is a component of the listed code |
| K0863 | E2391 | BCBST | Edited code is a component of the listed code |
| K0863 | E2392 | BCBST | Edited code is a component of the listed code |
| K0863 | E2393 | BCBST | Edited code is a component of the listed code |
| K0863 | E2394 | BCBST | Edited code is a component of the listed code |
| K0863 | E2395 | BCBST | Edited code is a component of the listed code |
| K0863 | E2396 | BCBST | Edited code is a component of the listed code |
| K0863 | K0015 | BCBST | Edited code is a component of the listed code |
| K0863 | K0017 | BCBST | Edited code is a component of the listed code |
| K0863 | K0018 | BCBST | Edited code is a component of the listed code |
| K0863 | K0019 | BCBST | Edited code is a component of the listed code |
| K0863 | K0020 | BCBST | Edited code is a component of the listed code |
| K0863 | K0037 | BCBST | Edited code is a component of the listed code |
| K0863 | K0041 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0863 | K0042 | BCBST | Edited code is a component of the listed code |
| K0863 | K0043 | BCBST | Edited code is a component of the listed code |
| K0863 | K0044 | BCBST | Edited code is a component of the listed code |
| K0863 | K0045 | BCBST | Edited code is a component of the listed code |
| K0863 | K0046 | BCBST | Edited code is a component of the listed code |
| K0863 | K0047 | BCBST | Edited code is a component of the listed code |
| K0863 | K0051 | BCBST | Edited code is a component of the listed code |
| K0863 | K0052 | BCBST | Edited code is a component of the listed code |
| K0863 | K0098 | BCBST | Edited code is a component of the listed code |
| K0864 | E0971 | BCBST | Edited code is a component of the listed code |
| K0864 | E0978 | BCBST | Edited code is a component of the listed code |
| K0864 | E0981 | BCBST | Edited code is a component of the listed code |
| K0864 | E0982 | BCBST | Edited code is a component of the listed code |
| K0864 | E0995 | BCBST | Edited code is a component of the listed code |
| K0864 | E1225 | BCBST | Edited code is a component of the listed code |
| K0864 | E2357 | BCBST | Edited code is a component of the listed code |
| K0864 | E2366 | BCBST | Edited code is a component of the listed code |
| K0864 | E2368 | BCBST | Edited code is a component of the listed code |
| K0864 | E2369 | BCBST | Edited code is a component of the listed code |
| K0864 | E2370 | BCBST | Edited code is a component of the listed code |
| K0864 | E2374 | BCBST | Edited code is a component of the listed code |
| K0864 | E2375 | BCBST | Edited code is a component of the listed code |
| K0864 | E2376 | BCBST | Edited code is a component of the listed code |
| K0864 | E2381 | BCBST | Edited code is a component of the listed code |
| K0864 | E2382 | BCBST | Edited code is a component of the listed code |
| K0864 | E2383 | BCBST | Edited code is a component of the listed code |
| K0864 | E2384 | BCBST | Edited code is a component of the listed code |
| K0864 | E2385 | BCBST | Edited code is a component of the listed code |
| K0864 | E2386 | BCBST | Edited code is a component of the listed code |
| K0864 | E2387 | BCBST | Edited code is a component of the listed code |
| K0864 | E2388 | BCBST | Edited code is a component of the listed code |
| K0864 | E2389 | BCBST | Edited code is a component of the listed code |
| K0864 | E2390 | BCBST | Edited code is a component of the listed code |
| K0864 | E2391 | BCBST | Edited code is a component of the listed code |
| K0864 | E2392 | BCBST | Edited code is a component of the listed code |
| K0864 | E2393 | BCBST | Edited code is a component of the listed code |
| K0864 | E2394 | BCBST | Edited code is a component of the listed code |
| K0864 | E2395 | BCBST | Edited code is a component of the listed code |
| K0864 | E2396 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0864 | K0015 | BCBST | Edited code is a component of the listed code |
| K0864 | K0017 | BCBST | Edited code is a component of the listed code |
| K0864 | K0018 | BCBST | Edited code is a component of the listed code |
| K0864 | K0019 | BCBST | Edited code is a component of the listed code |
| K0864 | K0020 | BCBST | Edited code is a component of the listed code |
| K0864 | K0037 | BCBST | Edited code is a component of the listed code |
| K0864 | K0041 | BCBST | Edited code is a component of the listed code |
| K0864 | K0042 | BCBST | Edited code is a component of the listed code |
| K0864 | K0043 | BCBST | Edited code is a component of the listed code |
| K0864 | K0044 | BCBST | Edited code is a component of the listed code |
| K0864 | K0045 | BCBST | Edited code is a component of the listed code |
| K0864 | K0046 | BCBST | Edited code is a component of the listed code |
| K0864 | K0047 | BCBST | Edited code is a component of the listed code |
| K0864 | K0051 | BCBST | Edited code is a component of the listed code |
| K0864 | K0052 | BCBST | Edited code is a component of the listed code |
| K0864 | K0098 | BCBST | Edited code is a component of the listed code |
| K0868 | E0971 | BCBST | Edited code is a component of the listed code |
| K0868 | E0978 | BCBST | Edited code is a component of the listed code |
| K0868 | E0981 | BCBST | Edited code is a component of the listed code |
| K0868 | E0982 | BCBST | Edited code is a component of the listed code |
| K0868 | E0995 | BCBST | Edited code is a component of the listed code |
| K0868 | E1225 | BCBST | Edited code is a component of the listed code |
| K0868 | E2357 | BCBST | Edited code is a component of the listed code |
| K0868 | E2366 | BCBST | Edited code is a component of the listed code |
| K0868 | E2368 | BCBST | Edited code is a component of the listed code |
| K0868 | E2369 | BCBST | Edited code is a component of the listed code |
| K0868 | E2370 | BCBST | Edited code is a component of the listed code |
| K0868 | E2374 | BCBST | Edited code is a component of the listed code |
| K0868 | E2375 | BCBST | Edited code is a component of the listed code |
| K0868 | E2376 | BCBST | Edited code is a component of the listed code |
| K0868 | E2381 | BCBST | Edited code is a component of the listed code |
| K0868 | E2382 | BCBST | Edited code is a component of the listed code |
| K0868 | E2383 | BCBST | Edited code is a component of the listed code |
| K0868 | E2384 | BCBST | Edited code is a component of the listed code |
| K0868 | E2385 | BCBST | Edited code is a component of the listed code |
| K0868 | E2386 | BCBST | Edited code is a component of the listed code |
| K0868 | E2387 | BCBST | Edited code is a component of the listed code |
| K0868 | E2388 | BCBST | Edited code is a component of the listed code |
| K0868 | E2389 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0868 | E2390 | BCBST | Edited code is a component of the listed code |
| K0868 | E2391 | BCBST | Edited code is a component of the listed code |
| K0868 | E2392 | BCBST | Edited code is a component of the listed code |
| K0868 | E2393 | BCBST | Edited code is a component of the listed code |
| K0868 | E2394 | BCBST | Edited code is a component of the listed code |
| K0868 | E2395 | BCBST | Edited code is a component of the listed code |
| K0868 | E2396 | BCBST | Edited code is a component of the listed code |
| K0868 | K0015 | BCBST | Edited code is a component of the listed code |
| K0868 | K0017 | BCBST | Edited code is a component of the listed code |
| K0868 | K0018 | BCBST | Edited code is a component of the listed code |
| K0868 | K0019 | BCBST | Edited code is a component of the listed code |
| K0868 | K0020 | BCBST | Edited code is a component of the listed code |
| K0868 | K0037 | BCBST | Edited code is a component of the listed code |
| K0868 | K0041 | BCBST | Edited code is a component of the listed code |
| K0868 | K0042 | BCBST | Edited code is a component of the listed code |
| K0868 | K0043 | BCBST | Edited code is a component of the listed code |
| K0868 | K0044 | BCBST | Edited code is a component of the listed code |
| K0868 | K0045 | BCBST | Edited code is a component of the listed code |
| K0868 | K0046 | BCBST | Edited code is a component of the listed code |
| K0868 | K0047 | BCBST | Edited code is a component of the listed code |
| K0868 | K0051 | BCBST | Edited code is a component of the listed code |
| K0868 | K0052 | BCBST | Edited code is a component of the listed code |
| K0868 | K0098 | BCBST | Edited code is a component of the listed code |
| K0869 | E0971 | BCBST | Edited code is a component of the listed code |
| K0869 | E0978 | BCBST | Edited code is a component of the listed code |
| K0869 | E0981 | BCBST | Edited code is a component of the listed code |
| K0869 | E0982 | BCBST | Edited code is a component of the listed code |
| K0869 | E0995 | BCBST | Edited code is a component of the listed code |
| K0869 | E1225 | BCBST | Edited code is a component of the listed code |
| K0869 | E2357 | BCBST | Edited code is a component of the listed code |
| K0869 | E2366 | BCBST | Edited code is a component of the listed code |
| K0869 | E2368 | BCBST | Edited code is a component of the listed code |
| K0869 | E2369 | BCBST | Edited code is a component of the listed code |
| K0869 | E2370 | BCBST | Edited code is a component of the listed code |
| K0869 | E2374 | BCBST | Edited code is a component of the listed code |
| K0869 | E2375 | BCBST | Edited code is a component of the listed code |
| K0869 | E2376 | BCBST | Edited code is a component of the listed code |
| K0869 | E2381 | BCBST | Edited code is a component of the listed code |
| K0869 | E2382 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0869 | E2383 | BCBST | Edited code is a component of the listed code |
| K0869 | E2384 | BCBST | Edited code is a component of the listed code |
| K0869 | E2385 | BCBST | Edited code is a component of the listed code |
| K0869 | E2386 | BCBST | Edited code is a component of the listed code |
| K0869 | E2387 | BCBST | Edited code is a component of the listed code |
| K0869 | E2388 | BCBST | Edited code is a component of the listed code |
| K0869 | E2389 | BCBST | Edited code is a component of the listed code |
| K0869 | E2390 | BCBST | Edited code is a component of the listed code |
| K0869 | E2391 | BCBST | Edited code is a component of the listed code |
| K0869 | E2392 | BCBST | Edited code is a component of the listed code |
| K0869 | E2393 | BCBST | Edited code is a component of the listed code |
| K0869 | E2394 | BCBST | Edited code is a component of the listed code |
| K0869 | E2395 | BCBST | Edited code is a component of the listed code |
| K0869 | E2396 | BCBST | Edited code is a component of the listed code |
| K0869 | K0015 | BCBST | Edited code is a component of the listed code |
| K0869 | K0017 | BCBST | Edited code is a component of the listed code |
| K0869 | K0018 | BCBST | Edited code is a component of the listed code |
| K0869 | K0019 | BCBST | Edited code is a component of the listed code |
| K0869 | K0020 | BCBST | Edited code is a component of the listed code |
| K0869 | K0037 | BCBST | Edited code is a component of the listed code |
| K0869 | K0041 | BCBST | Edited code is a component of the listed code |
| K0869 | K0042 | BCBST | Edited code is a component of the listed code |
| K0869 | K0043 | BCBST | Edited code is a component of the listed code |
| K0869 | K0044 | BCBST | Edited code is a component of the listed code |
| K0869 | K0045 | BCBST | Edited code is a component of the listed code |
| K0869 | K0046 | BCBST | Edited code is a component of the listed code |
| K0869 | K0047 | BCBST | Edited code is a component of the listed code |
| K0869 | K0051 | BCBST | Edited code is a component of the listed code |
| K0869 | K0052 | BCBST | Edited code is a component of the listed code |
| K0869 | K0098 | BCBST | Edited code is a component of the listed code |
| K0870 | E0971 | BCBST | Edited code is a component of the listed code |
| K0870 | E0978 | BCBST | Edited code is a component of the listed code |
| K0870 | E0981 | BCBST | Edited code is a component of the listed code |
| K0870 | E0982 | BCBST | Edited code is a component of the listed code |
| K0870 | E0995 | BCBST | Edited code is a component of the listed code |
| K0870 | E1225 | BCBST | Edited code is a component of the listed code |
| K0870 | E2357 | BCBST | Edited code is a component of the listed code |
| K0870 | E2366 | BCBST | Edited code is a component of the listed code |
| K0870 | E2368 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0870 | E2369 | BCBST | Edited code is a component of the listed code |
| K0870 | E2370 | BCBST | Edited code is a component of the listed code |
| K0870 | E2374 | BCBST | Edited code is a component of the listed code |
| K0870 | E2375 | BCBST | Edited code is a component of the listed code |
| K0870 | E2376 | BCBST | Edited code is a component of the listed code |
| K0870 | E2381 | BCBST | Edited code is a component of the listed code |
| K0870 | E2382 | BCBST | Edited code is a component of the listed code |
| K0870 | E2383 | BCBST | Edited code is a component of the listed code |
| K0870 | E2384 | BCBST | Edited code is a component of the listed code |
| K0870 | E2385 | BCBST | Edited code is a component of the listed code |
| K0870 | E2386 | BCBST | Edited code is a component of the listed code |
| K0870 | E2387 | BCBST | Edited code is a component of the listed code |
| K0870 | E2388 | BCBST | Edited code is a component of the listed code |
| K0870 | E2389 | BCBST | Edited code is a component of the listed code |
| K0870 | E2390 | BCBST | Edited code is a component of the listed code |
| K0870 | E2391 | BCBST | Edited code is a component of the listed code |
| K0870 | E2392 | BCBST | Edited code is a component of the listed code |
| K0870 | E2393 | BCBST | Edited code is a component of the listed code |
| K0870 | E2394 | BCBST | Edited code is a component of the listed code |
| K0870 | E2395 | BCBST | Edited code is a component of the listed code |
| K0870 | E2396 | BCBST | Edited code is a component of the listed code |
| K0870 | K0015 | BCBST | Edited code is a component of the listed code |
| K0870 | K0017 | BCBST | Edited code is a component of the listed code |
| K0870 | K0018 | BCBST | Edited code is a component of the listed code |
| K0870 | K0019 | BCBST | Edited code is a component of the listed code |
| K0870 | K0020 | BCBST | Edited code is a component of the listed code |
| K0870 | K0037 | BCBST | Edited code is a component of the listed code |
| K0870 | K0041 | BCBST | Edited code is a component of the listed code |
| K0870 | K0042 | BCBST | Edited code is a component of the listed code |
| K0870 | K0043 | BCBST | Edited code is a component of the listed code |
| K0870 | K0044 | BCBST | Edited code is a component of the listed code |
| K0870 | K0045 | BCBST | Edited code is a component of the listed code |
| K0870 | K0046 | BCBST | Edited code is a component of the listed code |
| K0870 | K0047 | BCBST | Edited code is a component of the listed code |
| K0870 | K0051 | BCBST | Edited code is a component of the listed code |
| K0870 | K0052 | BCBST | Edited code is a component of the listed code |
| K0870 | K0098 | BCBST | Edited code is a component of the listed code |
| K0871 | E0971 | BCBST | Edited code is a component of the listed code |
| K0871 | E0978 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0871 | E0981 | BCBST | Edited code is a component of the listed code |
| K0871 | E0982 | BCBST | Edited code is a component of the listed code |
| K0871 | E0995 | BCBST | Edited code is a component of the listed code |
| K0871 | E1225 | BCBST | Edited code is a component of the listed code |
| K0871 | E2357 | BCBST | Edited code is a component of the listed code |
| K0871 | E2366 | BCBST | Edited code is a component of the listed code |
| K0871 | E2368 | BCBST | Edited code is a component of the listed code |
| K0871 | E2369 | BCBST | Edited code is a component of the listed code |
| K0871 | E2370 | BCBST | Edited code is a component of the listed code |
| K0871 | E2374 | BCBST | Edited code is a component of the listed code |
| K0871 | E2375 | BCBST | Edited code is a component of the listed code |
| K0871 | E2376 | BCBST | Edited code is a component of the listed code |
| K0871 | E2381 | BCBST | Edited code is a component of the listed code |
| K0871 | E2382 | BCBST | Edited code is a component of the listed code |
| K0871 | E2383 | BCBST | Edited code is a component of the listed code |
| K0871 | E2384 | BCBST | Edited code is a component of the listed code |
| K0871 | E2385 | BCBST | Edited code is a component of the listed code |
| K0871 | E2386 | BCBST | Edited code is a component of the listed code |
| K0871 | E2387 | BCBST | Edited code is a component of the listed code |
| K0871 | E2388 | BCBST | Edited code is a component of the listed code |
| K0871 | E2389 | BCBST | Edited code is a component of the listed code |
| K0871 | E2390 | BCBST | Edited code is a component of the listed code |
| K0871 | E2391 | BCBST | Edited code is a component of the listed code |
| K0871 | E2392 | BCBST | Edited code is a component of the listed code |
| K0871 | E2393 | BCBST | Edited code is a component of the listed code |
| K0871 | E2394 | BCBST | Edited code is a component of the listed code |
| K0871 | E2395 | BCBST | Edited code is a component of the listed code |
| K0871 | E2396 | BCBST | Edited code is a component of the listed code |
| K0871 | K0015 | BCBST | Edited code is a component of the listed code |
| K0871 | K0017 | BCBST | Edited code is a component of the listed code |
| K0871 | K0018 | BCBST | Edited code is a component of the listed code |
| K0871 | K0019 | BCBST | Edited code is a component of the listed code |
| K0871 | K0020 | BCBST | Edited code is a component of the listed code |
| K0871 | K0037 | BCBST | Edited code is a component of the listed code |
| K0871 | K0041 | BCBST | Edited code is a component of the listed code |
| K0871 | K0042 | BCBST | Edited code is a component of the listed code |
| K0871 | K0043 | BCBST | Edited code is a component of the listed code |
| K0871 | K0044 | BCBST | Edited code is a component of the listed code |
| K0871 | K0045 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0871 | K0046 | BCBST | Edited code is a component of the listed code |
| K0871 | K0047 | BCBST | Edited code is a component of the listed code |
| K0871 | K0051 | BCBST | Edited code is a component of the listed code |
| K0871 | K0052 | BCBST | Edited code is a component of the listed code |
| K0871 | K0098 | BCBST | Edited code is a component of the listed code |
| K0877 | E0971 | BCBST | Edited code is a component of the listed code |
| K0877 | E0978 | BCBST | Edited code is a component of the listed code |
| K0877 | E0981 | BCBST | Edited code is a component of the listed code |
| K0877 | E0982 | BCBST | Edited code is a component of the listed code |
| K0877 | E0995 | BCBST | Edited code is a component of the listed code |
| K0877 | E1225 | BCBST | Edited code is a component of the listed code |
| K0877 | E2357 | BCBST | Edited code is a component of the listed code |
| K0877 | E2366 | BCBST | Edited code is a component of the listed code |
| K0877 | E2368 | BCBST | Edited code is a component of the listed code |
| K0877 | E2369 | BCBST | Edited code is a component of the listed code |
| K0877 | E2370 | BCBST | Edited code is a component of the listed code |
| K0877 | E2374 | BCBST | Edited code is a component of the listed code |
| K0877 | E2375 | BCBST | Edited code is a component of the listed code |
| K0877 | E2376 | BCBST | Edited code is a component of the listed code |
| K0877 | E2381 | BCBST | Edited code is a component of the listed code |
| K0877 | E2382 | BCBST | Edited code is a component of the listed code |
| K0877 | E2383 | BCBST | Edited code is a component of the listed code |
| K0877 | E2384 | BCBST | Edited code is a component of the listed code |
| K0877 | E2385 | BCBST | Edited code is a component of the listed code |
| K0877 | E2386 | BCBST | Edited code is a component of the listed code |
| K0877 | E2387 | BCBST | Edited code is a component of the listed code |
| K0877 | E2388 | BCBST | Edited code is a component of the listed code |
| K0877 | E2389 | BCBST | Edited code is a component of the listed code |
| K0877 | E2390 | BCBST | Edited code is a component of the listed code |
| K0877 | E2391 | BCBST | Edited code is a component of the listed code |
| K0877 | E2392 | BCBST | Edited code is a component of the listed code |
| K0877 | E2393 | BCBST | Edited code is a component of the listed code |
| K0877 | E2394 | BCBST | Edited code is a component of the listed code |
| K0877 | E2395 | BCBST | Edited code is a component of the listed code |
| K0877 | E2396 | BCBST | Edited code is a component of the listed code |
| K0877 | K0015 | BCBST | Edited code is a component of the listed code |
| K0877 | K0017 | BCBST | Edited code is a component of the listed code |
| K0877 | K0018 | BCBST | Edited code is a component of the listed code |
| K0877 | K0019 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0877 | K0020 | BCBST | Edited code is a component of the listed code |
| K0877 | K0037 | BCBST | Edited code is a component of the listed code |
| K0877 | K0041 | BCBST | Edited code is a component of the listed code |
| K0877 | K0042 | BCBST | Edited code is a component of the listed code |
| K0877 | K0043 | BCBST | Edited code is a component of the listed code |
| K0877 | K0044 | BCBST | Edited code is a component of the listed code |
| K0877 | K0045 | BCBST | Edited code is a component of the listed code |
| K0877 | K0046 | BCBST | Edited code is a component of the listed code |
| K0877 | K0047 | BCBST | Edited code is a component of the listed code |
| K0877 | K0051 | BCBST | Edited code is a component of the listed code |
| K0877 | K0052 | BCBST | Edited code is a component of the listed code |
| K0877 | K0098 | BCBST | Edited code is a component of the listed code |
| K0878 | E0971 | BCBST | Edited code is a component of the listed code |
| K0878 | E0978 | BCBST | Edited code is a component of the listed code |
| K0878 | E0981 | BCBST | Edited code is a component of the listed code |
| K0878 | E0982 | BCBST | Edited code is a component of the listed code |
| K0878 | E0995 | BCBST | Edited code is a component of the listed code |
| K0878 | E1225 | BCBST | Edited code is a component of the listed code |
| K0878 | E2357 | BCBST | Edited code is a component of the listed code |
| K0878 | E2366 | BCBST | Edited code is a component of the listed code |
| K0878 | E2368 | BCBST | Edited code is a component of the listed code |
| K0878 | E2369 | BCBST | Edited code is a component of the listed code |
| K0878 | E2370 | BCBST | Edited code is a component of the listed code |
| K0878 | E2374 | BCBST | Edited code is a component of the listed code |
| K0878 | E2375 | BCBST | Edited code is a component of the listed code |
| K0878 | E2376 | BCBST | Edited code is a component of the listed code |
| K0878 | E2381 | BCBST | Edited code is a component of the listed code |
| K0878 | E2382 | BCBST | Edited code is a component of the listed code |
| K0878 | E2383 | BCBST | Edited code is a component of the listed code |
| K0878 | E2384 | BCBST | Edited code is a component of the listed code |
| K0878 | E2385 | BCBST | Edited code is a component of the listed code |
| K0878 | E2386 | BCBST | Edited code is a component of the listed code |
| K0878 | E2387 | BCBST | Edited code is a component of the listed code |
| K0878 | E2388 | BCBST | Edited code is a component of the listed code |
| K0878 | E2389 | BCBST | Edited code is a component of the listed code |
| K0878 | E2390 | BCBST | Edited code is a component of the listed code |
| K0878 | E2391 | BCBST | Edited code is a component of the listed code |
| K0878 | E2392 | BCBST | Edited code is a component of the listed code |
| K0878 | E2393 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0878 | E2394 | BCBST | Edited code is a component of the listed code |
| K0878 | E2395 | BCBST | Edited code is a component of the listed code |
| K0878 | E2396 | BCBST | Edited code is a component of the listed code |
| K0878 | K0015 | BCBST | Edited code is a component of the listed code |
| K0878 | K0017 | BCBST | Edited code is a component of the listed code |
| K0878 | K0018 | BCBST | Edited code is a component of the listed code |
| K0878 | K0019 | BCBST | Edited code is a component of the listed code |
| K0878 | K0020 | BCBST | Edited code is a component of the listed code |
| K0878 | K0037 | BCBST | Edited code is a component of the listed code |
| K0878 | K0041 | BCBST | Edited code is a component of the listed code |
| K0878 | K0042 | BCBST | Edited code is a component of the listed code |
| K0878 | K0043 | BCBST | Edited code is a component of the listed code |
| K0878 | K0044 | BCBST | Edited code is a component of the listed code |
| K0878 | K0045 | BCBST | Edited code is a component of the listed code |
| K0878 | K0046 | BCBST | Edited code is a component of the listed code |
| K0878 | K0047 | BCBST | Edited code is a component of the listed code |
| K0878 | K0051 | BCBST | Edited code is a component of the listed code |
| K0878 | K0052 | BCBST | Edited code is a component of the listed code |
| K0878 | K0098 | BCBST | Edited code is a component of the listed code |
| K0879 | E0971 | BCBST | Edited code is a component of the listed code |
| K0879 | E0978 | BCBST | Edited code is a component of the listed code |
| K0879 | E0981 | BCBST | Edited code is a component of the listed code |
| K0879 | E0982 | BCBST | Edited code is a component of the listed code |
| K0879 | E0995 | BCBST | Edited code is a component of the listed code |
| K0879 | E1225 | BCBST | Edited code is a component of the listed code |
| K0879 | E2357 | BCBST | Edited code is a component of the listed code |
| K0879 | E2366 | BCBST | Edited code is a component of the listed code |
| K0879 | E2368 | BCBST | Edited code is a component of the listed code |
| K0879 | E2369 | BCBST | Edited code is a component of the listed code |
| K0879 | E2370 | BCBST | Edited code is a component of the listed code |
| K0879 | E2374 | BCBST | Edited code is a component of the listed code |
| K0879 | E2375 | BCBST | Edited code is a component of the listed code |
| K0879 | E2376 | BCBST | Edited code is a component of the listed code |
| K0879 | E2381 | BCBST | Edited code is a component of the listed code |
| K0879 | E2382 | BCBST | Edited code is a component of the listed code |
| K0879 | E2383 | BCBST | Edited code is a component of the listed code |
| K0879 | E2384 | BCBST | Edited code is a component of the listed code |
| K0879 | E2385 | BCBST | Edited code is a component of the listed code |
| K0879 | E2386 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0879 | E2387 | BCBST | Edited code is a component of the listed code |
| K0879 | E2388 | BCBST | Edited code is a component of the listed code |
| K0879 | E2389 | BCBST | Edited code is a component of the listed code |
| K0879 | E2390 | BCBST | Edited code is a component of the listed code |
| K0879 | E2391 | BCBST | Edited code is a component of the listed code |
| K0879 | E2392 | BCBST | Edited code is a component of the listed code |
| K0879 | E2393 | BCBST | Edited code is a component of the listed code |
| K0879 | E2394 | BCBST | Edited code is a component of the listed code |
| K0879 | E2395 | BCBST | Edited code is a component of the listed code |
| K0879 | E2396 | BCBST | Edited code is a component of the listed code |
| K0879 | K0015 | BCBST | Edited code is a component of the listed code |
| K0879 | K0017 | BCBST | Edited code is a component of the listed code |
| K0879 | K0018 | BCBST | Edited code is a component of the listed code |
| K0879 | K0019 | BCBST | Edited code is a component of the listed code |
| K0879 | K0020 | BCBST | Edited code is a component of the listed code |
| K0879 | K0037 | BCBST | Edited code is a component of the listed code |
| K0879 | K0041 | BCBST | Edited code is a component of the listed code |
| K0879 | K0042 | BCBST | Edited code is a component of the listed code |
| K0879 | K0043 | BCBST | Edited code is a component of the listed code |
| K0879 | K0044 | BCBST | Edited code is a component of the listed code |
| K0879 | K0045 | BCBST | Edited code is a component of the listed code |
| K0879 | K0046 | BCBST | Edited code is a component of the listed code |
| K0879 | K0047 | BCBST | Edited code is a component of the listed code |
| K0879 | K0051 | BCBST | Edited code is a component of the listed code |
| K0879 | K0052 | BCBST | Edited code is a component of the listed code |
| K0879 | K0098 | BCBST | Edited code is a component of the listed code |
| K0880 | E0971 | BCBST | Edited code is a component of the listed code |
| K0880 | E0978 | BCBST | Edited code is a component of the listed code |
| K0880 | E0981 | BCBST | Edited code is a component of the listed code |
| K0880 | E0982 | BCBST | Edited code is a component of the listed code |
| K0880 | E0995 | BCBST | Edited code is a component of the listed code |
| K0880 | E1225 | BCBST | Edited code is a component of the listed code |
| K0880 | E2357 | BCBST | Edited code is a component of the listed code |
| K0880 | E2366 | BCBST | Edited code is a component of the listed code |
| K0880 | E2368 | BCBST | Edited code is a component of the listed code |
| K0880 | E2369 | BCBST | Edited code is a component of the listed code |
| K0880 | E2370 | BCBST | Edited code is a component of the listed code |
| K0880 | E2374 | BCBST | Edited code is a component of the listed code |
| K0880 | E2375 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0880 | E2376 | BCBST | Edited code is a component of the listed code |
| K0880 | E2381 | BCBST | Edited code is a component of the listed code |
| K0880 | E2382 | BCBST | Edited code is a component of the listed code |
| K0880 | E2383 | BCBST | Edited code is a component of the listed code |
| K0880 | E2384 | BCBST | Edited code is a component of the listed code |
| K0880 | E2385 | BCBST | Edited code is a component of the listed code |
| K0880 | E2386 | BCBST | Edited code is a component of the listed code |
| K0880 | E2387 | BCBST | Edited code is a component of the listed code |
| K0880 | E2388 | BCBST | Edited code is a component of the listed code |
| K0880 | E2389 | BCBST | Edited code is a component of the listed code |
| K0880 | E2390 | BCBST | Edited code is a component of the listed code |
| K0880 | E2391 | BCBST | Edited code is a component of the listed code |
| K0880 | E2392 | BCBST | Edited code is a component of the listed code |
| K0880 | E2393 | BCBST | Edited code is a component of the listed code |
| K0880 | E2394 | BCBST | Edited code is a component of the listed code |
| K0880 | E2395 | BCBST | Edited code is a component of the listed code |
| K0880 | E2396 | BCBST | Edited code is a component of the listed code |
| K0880 | K0015 | BCBST | Edited code is a component of the listed code |
| K0880 | K0017 | BCBST | Edited code is a component of the listed code |
| K0880 | K0018 | BCBST | Edited code is a component of the listed code |
| K0880 | K0019 | BCBST | Edited code is a component of the listed code |
| K0880 | K0020 | BCBST | Edited code is a component of the listed code |
| K0880 | K0037 | BCBST | Edited code is a component of the listed code |
| K0880 | K0041 | BCBST | Edited code is a component of the listed code |
| K0880 | K0042 | BCBST | Edited code is a component of the listed code |
| K0880 | K0043 | BCBST | Edited code is a component of the listed code |
| K0880 | K0044 | BCBST | Edited code is a component of the listed code |
| K0880 | K0045 | BCBST | Edited code is a component of the listed code |
| K0880 | K0046 | BCBST | Edited code is a component of the listed code |
| K0880 | K0047 | BCBST | Edited code is a component of the listed code |
| K0880 | K0051 | BCBST | Edited code is a component of the listed code |
| K0880 | K0052 | BCBST | Edited code is a component of the listed code |
| K0880 | K0098 | BCBST | Edited code is a component of the listed code |
| K0884 | E0971 | BCBST | Edited code is a component of the listed code |
| K0884 | E0978 | BCBST | Edited code is a component of the listed code |
| K0884 | E0981 | BCBST | Edited code is a component of the listed code |
| K0884 | E0982 | BCBST | Edited code is a component of the listed code |
| K0884 | E0995 | BCBST | Edited code is a component of the listed code |
| K0884 | E1225 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0884 | E2357 | BCBST | Edited code is a component of the listed code |
| K0884 | E2366 | BCBST | Edited code is a component of the listed code |
| K0884 | E2368 | BCBST | Edited code is a component of the listed code |
| K0884 | E2369 | BCBST | Edited code is a component of the listed code |
| K0884 | E2370 | BCBST | Edited code is a component of the listed code |
| K0884 | E2374 | BCBST | Edited code is a component of the listed code |
| K0884 | E2375 | BCBST | Edited code is a component of the listed code |
| K0884 | E2376 | BCBST | Edited code is a component of the listed code |
| K0884 | E2381 | BCBST | Edited code is a component of the listed code |
| K0884 | E2382 | BCBST | Edited code is a component of the listed code |
| K0884 | E2383 | BCBST | Edited code is a component of the listed code |
| K0884 | E2384 | BCBST | Edited code is a component of the listed code |
| K0884 | E2385 | BCBST | Edited code is a component of the listed code |
| K0884 | E2386 | BCBST | Edited code is a component of the listed code |
| K0884 | E2387 | BCBST | Edited code is a component of the listed code |
| K0884 | E2388 | BCBST | Edited code is a component of the listed code |
| K0884 | E2389 | BCBST | Edited code is a component of the listed code |
| K0884 | E2390 | BCBST | Edited code is a component of the listed code |
| K0884 | E2391 | BCBST | Edited code is a component of the listed code |
| K0884 | E2392 | BCBST | Edited code is a component of the listed code |
| K0884 | E2393 | BCBST | Edited code is a component of the listed code |
| K0884 | E2394 | BCBST | Edited code is a component of the listed code |
| K0884 | E2395 | BCBST | Edited code is a component of the listed code |
| K0884 | E2396 | BCBST | Edited code is a component of the listed code |
| K0884 | K0015 | BCBST | Edited code is a component of the listed code |
| K0884 | K0017 | BCBST | Edited code is a component of the listed code |
| K0884 | K0018 | BCBST | Edited code is a component of the listed code |
| K0884 | K0019 | BCBST | Edited code is a component of the listed code |
| K0884 | K0020 | BCBST | Edited code is a component of the listed code |
| K0884 | K0037 | BCBST | Edited code is a component of the listed code |
| K0884 | K0041 | BCBST | Edited code is a component of the listed code |
| K0884 | K0042 | BCBST | Edited code is a component of the listed code |
| K0884 | K0043 | BCBST | Edited code is a component of the listed code |
| K0884 | K0044 | BCBST | Edited code is a component of the listed code |
| K0884 | K0045 | BCBST | Edited code is a component of the listed code |
| K0884 | K0046 | BCBST | Edited code is a component of the listed code |
| K0884 | K0047 | BCBST | Edited code is a component of the listed code |
| K0884 | K0051 | BCBST | Edited code is a component of the listed code |
| K0884 | K0052 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0884 | K0098 | BCBST | Edited code is a component of the listed code |
| K0885 | E0971 | BCBST | Edited code is a component of the listed code |
| K0885 | E0978 | BCBST | Edited code is a component of the listed code |
| K0885 | E0981 | BCBST | Edited code is a component of the listed code |
| K0885 | E0982 | BCBST | Edited code is a component of the listed code |
| K0885 | E0995 | BCBST | Edited code is a component of the listed code |
| K0885 | E1225 | BCBST | Edited code is a component of the listed code |
| K0885 | E2357 | BCBST | Edited code is a component of the listed code |
| K0885 | E2366 | BCBST | Edited code is a component of the listed code |
| K0885 | E2368 | BCBST | Edited code is a component of the listed code |
| K0885 | E2369 | BCBST | Edited code is a component of the listed code |
| K0885 | E2370 | BCBST | Edited code is a component of the listed code |
| K0885 | E2374 | BCBST | Edited code is a component of the listed code |
| K0885 | E2375 | BCBST | Edited code is a component of the listed code |
| K0885 | E2376 | BCBST | Edited code is a component of the listed code |
| K0885 | E2381 | BCBST | Edited code is a component of the listed code |
| K0885 | E2382 | BCBST | Edited code is a component of the listed code |
| K0885 | E2383 | BCBST | Edited code is a component of the listed code |
| K0885 | E2384 | BCBST | Edited code is a component of the listed code |
| K0885 | E2385 | BCBST | Edited code is a component of the listed code |
| K0885 | E2386 | BCBST | Edited code is a component of the listed code |
| K0885 | E2387 | BCBST | Edited code is a component of the listed code |
| K0885 | E2388 | BCBST | Edited code is a component of the listed code |
| K0885 | E2389 | BCBST | Edited code is a component of the listed code |
| K0885 | E2390 | BCBST | Edited code is a component of the listed code |
| K0885 | E2391 | BCBST | Edited code is a component of the listed code |
| K0885 | E2392 | BCBST | Edited code is a component of the listed code |
| K0885 | E2393 | BCBST | Edited code is a component of the listed code |
| K0885 | E2394 | BCBST | Edited code is a component of the listed code |
| K0885 | E2395 | BCBST | Edited code is a component of the listed code |
| K0885 | E2396 | BCBST | Edited code is a component of the listed code |
| K0885 | K0015 | BCBST | Edited code is a component of the listed code |
| K0885 | K0017 | BCBST | Edited code is a component of the listed code |
| K0885 | K0018 | BCBST | Edited code is a component of the listed code |
| K0885 | K0019 | BCBST | Edited code is a component of the listed code |
| K0885 | K0020 | BCBST | Edited code is a component of the listed code |
| K0885 | K0037 | BCBST | Edited code is a component of the listed code |
| K0885 | K0041 | BCBST | Edited code is a component of the listed code |
| K0885 | K0042 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0885 | K0043 | BCBST | Edited code is a component of the listed code |
| K0885 | K0044 | BCBST | Edited code is a component of the listed code |
| K0885 | K0045 | BCBST | Edited code is a component of the listed code |
| K0885 | K0046 | BCBST | Edited code is a component of the listed code |
| K0885 | K0047 | BCBST | Edited code is a component of the listed code |
| K0885 | K0051 | BCBST | Edited code is a component of the listed code |
| K0885 | K0052 | BCBST | Edited code is a component of the listed code |
| K0885 | K0098 | BCBST | Edited code is a component of the listed code |
| K0886 | E0971 | BCBST | Edited code is a component of the listed code |
| K0886 | E0978 | BCBST | Edited code is a component of the listed code |
| K0886 | E0981 | BCBST | Edited code is a component of the listed code |
| K0886 | E0982 | BCBST | Edited code is a component of the listed code |
| K0886 | E0995 | BCBST | Edited code is a component of the listed code |
| K0886 | E1225 | BCBST | Edited code is a component of the listed code |
| K0886 | E2357 | BCBST | Edited code is a component of the listed code |
| K0886 | E2366 | BCBST | Edited code is a component of the listed code |
| K0886 | E2368 | BCBST | Edited code is a component of the listed code |
| K0886 | E2369 | BCBST | Edited code is a component of the listed code |
| K0886 | E2370 | BCBST | Edited code is a component of the listed code |
| K0886 | E2374 | BCBST | Edited code is a component of the listed code |
| K0886 | E2375 | BCBST | Edited code is a component of the listed code |
| K0886 | E2376 | BCBST | Edited code is a component of the listed code |
| K0886 | E2381 | BCBST | Edited code is a component of the listed code |
| K0886 | E2382 | BCBST | Edited code is a component of the listed code |
| K0886 | E2383 | BCBST | Edited code is a component of the listed code |
| K0886 | E2384 | BCBST | Edited code is a component of the listed code |
| K0886 | E2385 | BCBST | Edited code is a component of the listed code |
| K0886 | E2386 | BCBST | Edited code is a component of the listed code |
| K0886 | E2387 | BCBST | Edited code is a component of the listed code |
| K0886 | E2388 | BCBST | Edited code is a component of the listed code |
| K0886 | E2389 | BCBST | Edited code is a component of the listed code |
| K0886 | E2390 | BCBST | Edited code is a component of the listed code |
| K0886 | E2391 | BCBST | Edited code is a component of the listed code |
| K0886 | E2392 | BCBST | Edited code is a component of the listed code |
| K0886 | E2393 | BCBST | Edited code is a component of the listed code |
| K0886 | E2394 | BCBST | Edited code is a component of the listed code |
| K0886 | E2395 | BCBST | Edited code is a component of the listed code |
| K0886 | E2396 | BCBST | Edited code is a component of the listed code |
| K0886 | K0015 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0886 | K0017 | BCBST | Edited code is a component of the listed code |
| K0886 | K0018 | BCBST | Edited code is a component of the listed code |
| K0886 | K0019 | BCBST | Edited code is a component of the listed code |
| K0886 | K0020 | BCBST | Edited code is a component of the listed code |
| K0886 | K0037 | BCBST | Edited code is a component of the listed code |
| K0886 | K0041 | BCBST | Edited code is a component of the listed code |
| K0886 | K0042 | BCBST | Edited code is a component of the listed code |
| K0886 | K0043 | BCBST | Edited code is a component of the listed code |
| K0886 | K0044 | BCBST | Edited code is a component of the listed code |
| K0886 | K0045 | BCBST | Edited code is a component of the listed code |
| K0886 | K0046 | BCBST | Edited code is a component of the listed code |
| K0886 | K0047 | BCBST | Edited code is a component of the listed code |
| K0886 | K0051 | BCBST | Edited code is a component of the listed code |
| K0886 | K0052 | BCBST | Edited code is a component of the listed code |
| K0886 | K0098 | BCBST | Edited code is a component of the listed code |
| K0890 | E0971 | BCBST | Edited code is a component of the listed code |
| K0890 | E0978 | BCBST | Edited code is a component of the listed code |
| K0890 | E0981 | BCBST | Edited code is a component of the listed code |
| K0890 | E0982 | BCBST | Edited code is a component of the listed code |
| K0890 | E0995 | BCBST | Edited code is a component of the listed code |
| K0890 | E1225 | BCBST | Edited code is a component of the listed code |
| K0890 | E2357 | BCBST | Edited code is a component of the listed code |
| K0890 | E2366 | BCBST | Edited code is a component of the listed code |
| K0890 | E2368 | BCBST | Edited code is a component of the listed code |
| K0890 | E2369 | BCBST | Edited code is a component of the listed code |
| K0890 | E2370 | BCBST | Edited code is a component of the listed code |
| K0890 | E2374 | BCBST | Edited code is a component of the listed code |
| K0890 | E2375 | BCBST | Edited code is a component of the listed code |
| K0890 | E2376 | BCBST | Edited code is a component of the listed code |
| K0890 | E2381 | BCBST | Edited code is a component of the listed code |
| K0890 | E2382 | BCBST | Edited code is a component of the listed code |
| K0890 | E2383 | BCBST | Edited code is a component of the listed code |
| K0890 | E2384 | BCBST | Edited code is a component of the listed code |
| K0890 | E2385 | BCBST | Edited code is a component of the listed code |
| K0890 | E2386 | BCBST | Edited code is a component of the listed code |
| K0890 | E2387 | BCBST | Edited code is a component of the listed code |
| K0890 | E2388 | BCBST | Edited code is a component of the listed code |
| K0890 | E2389 | BCBST | Edited code is a component of the listed code |
| K0890 | E2390 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| K0890 | E2391 | BCBST | Edited code is a component of the listed code |
| K0890 | E2392 | BCBST | Edited code is a component of the listed code |
| K0890 | E2393 | BCBST | Edited code is a component of the listed code |
| K0890 | E2394 | BCBST | Edited code is a component of the listed code |
| K0890 | E2395 | BCBST | Edited code is a component of the listed code |
| K0890 | E2396 | BCBST | Edited code is a component of the listed code |
| K0890 | K0015 | BCBST | Edited code is a component of the listed code |
| K0890 | K0017 | BCBST | Edited code is a component of the listed code |
| K0890 | K0018 | BCBST | Edited code is a component of the listed code |
| K0890 | K0019 | BCBST | Edited code is a component of the listed code |
| K0890 | K0020 | BCBST | Edited code is a component of the listed code |
| K0890 | K0037 | BCBST | Edited code is a component of the listed code |
| K0890 | K0041 | BCBST | Edited code is a component of the listed code |
| K0890 | K0042 | BCBST | Edited code is a component of the listed code |
| K0890 | K0043 | BCBST | Edited code is a component of the listed code |
| K0890 | K0044 | BCBST | Edited code is a component of the listed code |
| K0890 | K0045 | BCBST | Edited code is a component of the listed code |
| K0890 | K0046 | BCBST | Edited code is a component of the listed code |
| K0890 | K0047 | BCBST | Edited code is a component of the listed code |
| K0890 | K0051 | BCBST | Edited code is a component of the listed code |
| K0890 | K0052 | BCBST | Edited code is a component of the listed code |
| K0890 | K0098 | BCBST | Edited code is a component of the listed code |
| K0891 | E0971 | BCBST | Edited code is a component of the listed code |
| K0891 | E0978 | BCBST | Edited code is a component of the listed code |
| K0891 | E0981 | BCBST | Edited code is a component of the listed code |
| K0891 | E0982 | BCBST | Edited code is a component of the listed code |
| K0891 | E0995 | BCBST | Edited code is a component of the listed code |
| K0891 | E1225 | BCBST | Edited code is a component of the listed code |
| K0891 | E2357 | BCBST | Edited code is a component of the listed code |
| K0891 | E2366 | BCBST | Edited code is a component of the listed code |
| K0891 | E2368 | BCBST | Edited code is a component of the listed code |
| K0891 | E2369 | BCBST | Edited code is a component of the listed code |
| K0891 | E2370 | BCBST | Edited code is a component of the listed code |
| K0891 | E2374 | BCBST | Edited code is a component of the listed code |
| K0891 | E2375 | BCBST | Edited code is a component of the listed code |
| K0891 | E2376 | BCBST | Edited code is a component of the listed code |
| K0891 | E2381 | BCBST | Edited code is a component of the listed code |
| K0891 | E2382 | BCBST | Edited code is a component of the listed code |
| K0891 | E2383 | BCBST | Edited code is a component of the listed code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| K0891 | E2384 | BCBST | Edited code is a component of the listed code |
| K0891 | E2385 | BCBST | Edited code is a component of the listed code |
| K0891 | E2386 | BCBST | Edited code is a component of the listed code |
| K0891 | E2387 | BCBST | Edited code is a component of the listed code |
| K0891 | E2388 | BCBST | Edited code is a component of the listed code |
| K0891 | E2389 | BCBST | Edited code is a component of the listed code |
| K0891 | E2390 | BCBST | Edited code is a component of the listed code |
| K0891 | E2391 | BCBST | Edited code is a component of the listed code |
| K0891 | E2392 | BCBST | Edited code is a component of the listed code |
| K0891 | E2393 | BCBST | Edited code is a component of the listed code |
| K0891 | E2394 | BCBST | Edited code is a component of the listed code |
| K0891 | E2395 | BCBST | Edited code is a component of the listed code |
| K0891 | E2396 | BCBST | Edited code is a component of the listed code |
| K0891 | K0015 | BCBST | Edited code is a component of the listed code |
| K0891 | K0017 | BCBST | Edited code is a component of the listed code |
| K0891 | K0018 | BCBST | Edited code is a component of the listed code |
| K0891 | K0019 | BCBST | Edited code is a component of the listed code |
| K0891 | K0020 | BCBST | Edited code is a component of the listed code |
| K0891 | K0037 | BCBST | Edited code is a component of the listed code |
| K0891 | K0041 | BCBST | Edited code is a component of the listed code |
| K0891 | K0042 | BCBST | Edited code is a component of the listed code |
| K0891 | K0043 | BCBST | Edited code is a component of the listed code |
| K0891 | K0044 | BCBST | Edited code is a component of the listed code |
| K0891 | K0045 | BCBST | Edited code is a component of the listed code |
| K0891 | K0046 | BCBST | Edited code is a component of the listed code |
| K0891 | K0047 | BCBST | Edited code is a component of the listed code |
| K0891 | K0051 | BCBST | Edited code is a component of the listed code |
| K0891 | K0052 | BCBST | Edited code is a component of the listed code |
| K0891 | K0098 | BCBST | Edited code is a component of the listed code |
| L0110 | L0110 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0120 | L0120 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0130 | L0130 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0140 | L0140 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0150 | L0150 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0160 | L0160 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| L0170 | L0170 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0172 | L0172 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0174 | L0174 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0180 | L0180 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0190 | L0190 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0200 | L0200 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0210 | L0210 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0220 | L0220 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0300 | L0300 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0310 | L0310 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0315 | L0315 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0317 | L0317 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0320 | L0320 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0321 | L0321 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0330 | L0330 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0331 | L0331 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0340 | L0340 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0350 | L0350 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0360 | L0360 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0370 | L0370 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0380 | L0380 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0390 | L0390 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0391 | L0391 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0400 | L0400 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| L0410 | L0410 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0420 | L0420 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0430 | L0430 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0440 | L0440 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0450 | L0450 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0452 | L0452 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0454 | L0454 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0456 | L0456 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0458 | L0458 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0460 | L0460 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0462 | L0462 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0464 | L0464 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0466 | L0466 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0468 | L0468 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0470 | L0470 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0472 | L0472 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0474 | L0474 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0480 | L0480 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0482 | L0482 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0484 | L0484 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0486 | L0486 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0488 | L0488 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0490 | L0490 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0700 | L0700 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| L0710 | L0710 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0810 | L0810 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0820 | L0820 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0830 | L0830 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0860 | L0860 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0960 | L0960 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0970 | L0970 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0972 | L0972 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0974 | L0974 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0976 | L0976 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0978 | L0978 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L0999 | L0999 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1000 | L1000 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1005 | L1005 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1010 | L1010 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1020 | L1020 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1025 | L1025 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1030 | L1030 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1040 | L1040 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1050 | L1050 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1060 | L1060 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1070 | L1070 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1080 | L1080 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1085 | L1085 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| L1090 | L1090 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1100 | L1100 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1110 | L1110 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1120 | L1120 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1200 | L1200 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1210 | L1210 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1220 | L1220 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1230 | L1230 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1240 | L1240 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1250 | L1250 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1260 | L1260 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1270 | L1270 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1290 | L1290 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1300 | L1300 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1310 | L1310 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1499 | L1499 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1500 | L1500 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1510 | L1510 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1520 | L1520 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1600 | L1600 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1610 | L1610 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1620 | L1620 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1630 | L1630 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1640 | L1640 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| L1650 | L1650 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1652 | L1652 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1660 | L1660 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1680 | L1680 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1685 | L1685 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1686 | L1686 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1690 | L1690 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1700 | L1700 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1710 | L1710 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1720 | L1720 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1730 | L1730 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1750 | L1750 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1755 | L1755 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1800 | L1800 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1810 | L1810 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1815 | L1815 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1820 | L1820 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1825 | L1825 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1830 | L1830 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1832 | L1832 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1834 | L1834 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1836 | L1836 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1840 | L1840 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1843 | L1843 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Print Date: 08/11/2008

BlueCross BlueShield of Tennessee-Coding Bundling Rules

Source: PNC-CARR

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| L1844 | L1844 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1845 | L1845 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1846 | L1846 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1847 | L1847 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1850 | L1850 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1855 | L1855 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1858 | L1858 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1860 | L1860 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1870 | L1870 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1880 | L1880 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1885 | L1885 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1900 | L1900 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1901 | L1901 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1902 | L1902 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1904 | L1904 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1906 | L1906 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1910 | L1910 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1920 | L1920 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1930 | L1930 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1940 | L1940 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1945 | L1945 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1950 | L1950 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1960 | L1960 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1970 | L1970 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| L1980 | L1980 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L1990 | L1990 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2000 | L2000 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2010 | L2010 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2020 | L2020 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2030 | L2030 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2035 | L2035 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2036 | L2036 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2037 | L2037 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2038 | L2038 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2039 | L2039 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2040 | L2040 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2050 | L2050 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2060 | L2060 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2070 | L2070 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2080 | L2080 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2090 | L2090 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2102 | L2102 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2104 | L2104 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2106 | L2106 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2108 | L2108 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2112 | L2112 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2114 | L2114 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2116 | L2116 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
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| L2122 | L2122 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2124 | L2124 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2126 | L2126 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2128 | L2128 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2132 | L2132 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2134 | L2134 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2136 | L2136 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2180 | L2180 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2182 | L2182 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2184 | L2184 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2186 | L2186 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2188 | L2188 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2190 | L2190 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2192 | L2192 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2230 | L2230 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2240 | L2240 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2250 | L2250 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2260 | L2260 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2265 | L2265 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2270 | L2270 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2275 | L2275 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2280 | L2280 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2300 | L2300 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2310 | L2310 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
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| L2320 | L2320 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2330 | L2330 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2335 | L2335 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2340 | L2340 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2350 | L2350 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2360 | L2360 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2370 | L2370 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2375 | L2375 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2397 | L2397 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2492 | L2492 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2500 | L2500 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2510 | L2510 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2520 | L2520 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2525 | L2525 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2526 | L2526 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2530 | L2530 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2540 | L2540 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2550 | L2550 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2580 | L2580 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2627 | L2627 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2628 | L2628 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2630 | L2630 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2640 | L2640 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2660 | L2660 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| L2670 | L2670 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2680 | L2680 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2755 | L2755 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2795 | L2795 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2800 | L2800 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2810 | L2810 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2820 | L2820 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2830 | L2830 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L2999 | L2999 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3100 | L3100 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3140 | L3140 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3150 | L3150 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3160 | L3160 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3170 | L3170 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3201 | L3201 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3202 | L3202 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3203 | L3203 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3204 | L3204 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3206 | L3206 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3207 | L3207 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3215 | L3215 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3216 | L3216 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3217 | L3217 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3219 | L3219 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| L3221 | L3221 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3222 | L3222 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3224 | L3224 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3225 | L3225 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3230 | L3230 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3254 | L3254 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3255 | L3255 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3257 | L3257 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3340 | L3340 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3350 | L3350 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3360 | L3360 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3370 | L3370 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3380 | L3380 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3390 | L3390 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3400 | L3400 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3410 | L3410 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3420 | L3420 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3430 | L3430 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3440 | L3440 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3450 | L3450 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3455 | L3455 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3460 | L3460 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3465 | L3465 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3470 | L3470 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| L3480 | L3480 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3485 | L3485 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3500 | L3500 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3510 | L3510 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3520 | L3520 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3530 | L3530 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3540 | L3540 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3550 | L3550 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3560 | L3560 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3570 | L3570 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3580 | L3580 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3590 | L3590 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3595 | L3595 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3600 | L3600 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3610 | L3610 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3620 | L3620 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3630 | L3630 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3640 | L3640 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3649 | L3649 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3650 | L3650 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3651 | L3651 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3652 | L3652 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3660 | L3660 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3670 | L3670 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| L3675 | L3675 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3677 | L3677 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3700 | L3700 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3701 | L3701 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3710 | L3710 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3720 | L3720 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3730 | L3730 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3740 | L3740 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3760 | L3760 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3762 | L3762 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3800 | L3800 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3805 | L3805 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3807 | L3807 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3810 | L3810 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3815 | L3815 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3820 | L3820 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3825 | L3825 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3830 | L3830 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3835 | L3835 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3840 | L3840 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3845 | L3845 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3850 | L3850 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3855 | L3855 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3860 | L3860 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| L3890 | L3890 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3900 | L3900 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3901 | L3901 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3902 | L3902 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3904 | L3904 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3906 | L3906 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3907 | L3907 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3908 | L3908 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3909 | L3909 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3910 | L3910 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3911 | L3911 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3912 | L3912 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3916 | L3916 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3918 | L3918 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3920 | L3920 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3922 | L3922 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3923 | L3923 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3924 | L3924 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3926 | L3926 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3928 | L3928 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3930 | L3930 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3932 | L3932 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3934 | L3934 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3936 | L3936 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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|---------------------------|-----------------------|---------------|--|
| L3938 | L3938 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3940 | L3940 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3942 | L3942 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3944 | L3944 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3946 | L3946 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3948 | L3948 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3950 | L3950 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3952 | L3952 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3954 | L3954 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3960 | L3960 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3962 | L3962 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3963 | L3963 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3964 | L3964 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3965 | L3965 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3966 | L3966 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3968 | L3968 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3969 | L3969 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3970 | L3970 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3972 | L3972 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3974 | L3974 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3980 | L3980 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3982 | L3982 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3984 | L3984 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3985 | L3985 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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| L3986 | L3986 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3995 | L3995 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L3999 | L3999 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L4000 | L4000 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L4010 | L4010 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L4020 | L4020 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L4030 | L4030 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L4040 | L4040 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L4045 | L4045 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L4050 | L4050 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L4055 | L4055 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L4060 | L4060 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L4070 | L4070 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L4080 | L4080 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L4090 | L4090 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L4100 | L4100 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L4110 | L4110 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L4130 | L4130 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L4210 | L4210 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L4350 | L4350 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L4360 | L4360 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L4370 | L4370 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L4380 | L4380 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L4386 | L4386 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Print Date: 08/11/2008

BlueCross BlueShield of Tennessee-Coding Bundling Rules

Source: PNC-CARR

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| L4392 | L4392 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L4394 | L4394 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L4396 | L4396 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L4398 | L4398 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5000 | L5000 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5010 | L5010 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5020 | L5020 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5050 | L5050 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5060 | L5060 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5100 | L5100 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5105 | L5105 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5150 | L5150 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5160 | L5160 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5200 | L5200 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5210 | L5210 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5220 | L5220 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5230 | L5230 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5250 | L5250 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5270 | L5270 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5280 | L5280 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5301 | L5301 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5311 | L5311 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5321 | L5321 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5331 | L5331 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| L5341 | L5341 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5400 | L5400 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5420 | L5420 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5450 | L5450 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5460 | L5460 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5500 | L5500 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5505 | L5505 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5510 | L5510 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5520 | L5520 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5530 | L5530 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5535 | L5535 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5540 | L5540 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5560 | L5560 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5570 | L5570 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5580 | L5580 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5585 | L5585 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5590 | L5590 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5595 | L5595 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5600 | L5600 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5610 | L5610 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5611 | L5611 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5613 | L5613 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5614 | L5614 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5616 | L5616 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| L5618 | L5618 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5620 | L5620 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5622 | L5622 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5624 | L5624 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5626 | L5626 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5628 | L5628 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5629 | L5629 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5630 | L5630 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5631 | L5631 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5632 | L5632 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5634 | L5634 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5636 | L5636 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5637 | L5637 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5638 | L5638 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5639 | L5639 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5640 | L5640 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5642 | L5642 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5643 | L5643 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5644 | L5644 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5645 | L5645 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5646 | L5646 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5647 | L5647 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5648 | L5648 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5649 | L5649 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| L5650 | L5650 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5651 | L5651 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5652 | L5652 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5653 | L5653 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5654 | L5654 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5655 | L5655 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5656 | L5656 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5658 | L5658 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5660 | L5660 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5661 | L5661 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5662 | L5662 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5663 | L5663 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5664 | L5664 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5665 | L5665 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5666 | L5666 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5668 | L5668 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5670 | L5670 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5671 | L5671 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5672 | L5672 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5680 | L5680 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5682 | L5682 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5684 | L5684 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5686 | L5686 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5688 | L5688 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| L5690 | L5690 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5692 | L5692 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5694 | L5694 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5696 | L5696 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5697 | L5697 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5698 | L5698 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5699 | L5699 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5700 | L5700 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5701 | L5701 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5702 | L5702 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5704 | L5704 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5705 | L5705 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5706 | L5706 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5707 | L5707 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5710 | L5710 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5711 | L5711 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5712 | L5712 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5714 | L5714 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5716 | L5716 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5718 | L5718 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5722 | L5722 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5724 | L5724 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5726 | L5726 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5728 | L5728 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

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| L5780 | L5780 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5781 | L5781 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5782 | L5782 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5785 | L5785 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5790 | L5790 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5795 | L5795 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5810 | L5810 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5811 | L5811 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5812 | L5812 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5814 | L5814 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5816 | L5816 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5818 | L5818 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5822 | L5822 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5824 | L5824 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5826 | L5826 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5828 | L5828 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5830 | L5830 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5840 | L5840 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5845 | L5845 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5848 | L5848 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5850 | L5850 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5855 | L5855 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5910 | L5910 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5920 | L5920 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| L5925 | L5925 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5930 | L5930 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5940 | L5940 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5950 | L5950 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5960 | L5960 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5962 | L5962 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5964 | L5964 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5966 | L5966 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5968 | L5968 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5970 | L5970 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5972 | L5972 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5974 | L5974 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5975 | L5975 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5976 | L5976 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5978 | L5978 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5979 | L5979 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5980 | L5980 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5981 | L5981 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5982 | L5982 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5984 | L5984 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5985 | L5985 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5986 | L5986 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5987 | L5987 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5988 | L5988 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| L5990 | L5990 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5995 | L5995 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L5999 | L5999 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6000 | L6000 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6010 | L6010 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6020 | L6020 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6025 | L6025 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6050 | L6050 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6055 | L6055 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6100 | L6100 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6110 | L6110 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6120 | L6120 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6130 | L6130 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6200 | L6200 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6205 | L6205 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6250 | L6250 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6300 | L6300 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6310 | L6310 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6320 | L6320 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6350 | L6350 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6360 | L6360 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6370 | L6370 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6380 | L6380 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6382 | L6382 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| L6384 | L6384 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6388 | L6388 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6400 | L6400 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6450 | L6450 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6500 | L6500 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6550 | L6550 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6570 | L6570 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6580 | L6580 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6582 | L6582 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6584 | L6584 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6586 | L6586 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6588 | L6588 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6590 | L6590 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6600 | L6600 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6605 | L6605 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6610 | L6610 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6615 | L6615 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6620 | L6620 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6623 | L6623 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6625 | L6625 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6628 | L6628 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6629 | L6629 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6630 | L6630 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6635 | L6635 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| L6637 | L6637 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6638 | L6638 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6640 | L6640 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6641 | L6641 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6642 | L6642 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6646 | L6646 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6647 | L6647 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6648 | L6648 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6655 | L6655 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6660 | L6660 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6665 | L6665 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6670 | L6670 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6672 | L6672 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6675 | L6675 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6676 | L6676 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6680 | L6680 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6682 | L6682 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6684 | L6684 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6686 | L6686 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6687 | L6687 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6688 | L6688 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6689 | L6689 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6690 | L6690 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6693 | L6693 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|--|
| L6700 | L6700 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6805 | L6805 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6810 | L6810 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6881 | L6881 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6882 | L6882 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6890 | L6890 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6895 | L6895 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6900 | L6900 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6905 | L6905 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6910 | L6910 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6915 | L6915 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6920 | L6920 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6925 | L6925 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6930 | L6930 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6935 | L6935 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6940 | L6940 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6945 | L6945 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6950 | L6950 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6955 | L6955 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6960 | L6960 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6965 | L6965 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6970 | L6970 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L6975 | L6975 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L7040 | L7040 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|--|
| L7045 | L7045 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L7170 | L7170 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L7180 | L7180 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L7185 | L7185 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L7186 | L7186 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L7190 | L7190 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L7191 | L7191 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L7260 | L7260 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L7261 | L7261 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L7266 | L7266 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L7272 | L7272 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L7274 | L7274 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L7362 | L7362 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L7366 | L7366 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L7368 | L7368 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L7499 | L7499 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L7500 | L7500 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L7510 | L7510 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L7900 | L7900 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8000 | L8000 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8001 | L8001 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8002 | L8002 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8010 | L8010 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8015 | L8015 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|--|
| L8020 | L8020 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8030 | L8030 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8035 | L8035 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8039 | L8039 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8041 | L8041 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8042 | L8042 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8043 | L8043 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8044 | L8044 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8045 | L8045 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8046 | L8046 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8047 | L8047 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8049 | L8049 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8210 | L8210 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8220 | L8220 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8230 | L8230 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8239 | L8239 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8300 | L8300 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8310 | L8310 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8320 | L8320 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8330 | L8330 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8499 | L8499 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8500 | L8500 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8501 | L8501 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8505 | L8505 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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| L8507 | L8507 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8509 | L8509 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8510 | L8510 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8600 | L8600 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8610 | L8610 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8612 | L8612 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8613 | L8613 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8614 | L8614 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8619 | L8619 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8630 | L8630 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8641 | L8641 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8642 | L8642 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8658 | L8658 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8670 | L8670 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L8699 | L8699 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| L9900 | L9900 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| M0064 | 99605 | NCCI | Misuse of column 2 code with column 1 code |
| M0064 | 99606 | NCCI | Misuse of column 2 code with column 1 code |
| M0064 | M0064 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| M0075 | M0075 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| M0076 | M0076 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| M0100 | M0100 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| M0300 | M0300 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| M0301 | M0301 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| P3000 | 88160 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 88161 | NCCI | NCCI Standards of medical / surgical practice |

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Print Date: 08/11/2008

BlueCross BlueShield of Tennessee-Coding Bundling Rules

Source: PNC-CARR

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| P3000 | 99201 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99202 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99203 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99204 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99205 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99211 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99212 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99213 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99214 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99215 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99217 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99218 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99219 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99220 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99221 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99222 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99223 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99231 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99232 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99233 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99234 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99235 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99236 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99238 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99239 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99241 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99242 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99243 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99244 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99245 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99251 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99252 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99253 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99254 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99255 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99281 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99282 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99283 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99284 | NCCI | NCCI Standards of medical / surgical practice |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| P3000 | 99285 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99291 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99292 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99295 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99296 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99298 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99300 | NCCI | Standards of medical/surgical practice |
| P3000 | 99304 | NCCI | Standards of medical/surgical practice |
| P3000 | 99305 | NCCI | Standards of medical/surgical practice |
| P3000 | 99306 | NCCI | Standards of medical/surgical practice |
| P3000 | 99307 | NCCI | Standards of medical/surgical practice |
| P3000 | 99308 | NCCI | Standards of medical/surgical practice |
| P3000 | 99309 | NCCI | Standards of medical/surgical practice |
| P3000 | 99310 | NCCI | Standards of medical/surgical practice |
| P3000 | 99315 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99316 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99318 | NCCI | Standards of medical/surgical practice |
| P3000 | 99324 | NCCI | Standards of medical/surgical practice |
| P3000 | 99325 | NCCI | Standards of medical/surgical practice |
| P3000 | 99326 | NCCI | Standards of medical/surgical practice |
| P3000 | 99327 | NCCI | Standards of medical/surgical practice |
| P3000 | 99328 | NCCI | Standards of medical/surgical practice |
| P3000 | 99334 | NCCI | Standards of medical/surgical practice |
| P3000 | 99335 | NCCI | Standards of medical/surgical practice |
| P3000 | 99336 | NCCI | Standards of medical/surgical practice |
| P3000 | 99337 | NCCI | Standards of medical/surgical practice |
| P3000 | 99341 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99342 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99343 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99344 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99345 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99347 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99348 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99349 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99350 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99354 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99355 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99356 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99357 | NCCI | NCCI Standards of medical / surgical practice |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| P3000 | 99360 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99431 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99432 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99433 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99435 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99436 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99440 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99455 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99456 | NCCI | NCCI Standards of medical / surgical practice |
| P3000 | 99477 | NCCI | Standard preparation/monitoring services for anesthesia |
| P3001 | 88141 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 88142 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P3001 | 88143 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P3001 | 88147 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P3001 | 88148 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P3001 | 88150 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P3001 | 88152 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P3001 | 88153 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P3001 | 88154 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P3001 | 88164 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P3001 | 88165 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P3001 | 88166 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P3001 | 88167 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P3001 | 88174 | NCCI | Misuse of Column 2 code with Column 1 code |
| P3001 | 88175 | NCCI | Misuse of Column 2 code with Column 1 code |
| P3001 | 99201 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99202 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99203 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99204 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99205 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99211 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99212 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99213 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99214 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99215 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99217 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99218 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99219 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99220 | NCCI | NCCI Standards of medical / surgical practice |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| P3001 | 99221 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99222 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99223 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99231 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99232 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99233 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99234 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99235 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99236 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99238 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99239 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99241 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99242 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99243 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99244 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99245 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99251 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99252 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99253 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99254 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99255 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99281 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99282 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99283 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99284 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99285 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99291 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99292 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99295 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99296 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99298 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99300 | NCCI | Standards of medical/surgical practice |
| P3001 | 99304 | NCCI | Standards of medical/surgical practice |
| P3001 | 99305 | NCCI | Standards of medical/surgical practice |
| P3001 | 99306 | NCCI | Standards of medical/surgical practice |
| P3001 | 99307 | NCCI | Standards of medical/surgical practice |
| P3001 | 99308 | NCCI | Standards of medical/surgical practice |
| P3001 | 99309 | NCCI | Standards of medical/surgical practice |
| P3001 | 99310 | NCCI | Standards of medical/surgical practice |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| P3001 | 99315 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99316 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99318 | NCCI | Standards of medical/surgical practice |
| P3001 | 99324 | NCCI | Standards of medical/surgical practice |
| P3001 | 99325 | NCCI | Standards of medical/surgical practice |
| P3001 | 99326 | NCCI | Standards of medical/surgical practice |
| P3001 | 99327 | NCCI | Standards of medical/surgical practice |
| P3001 | 99328 | NCCI | Standards of medical/surgical practice |
| P3001 | 99334 | NCCI | Standards of medical/surgical practice |
| P3001 | 99335 | NCCI | Standards of medical/surgical practice |
| P3001 | 99336 | NCCI | Standards of medical/surgical practice |
| P3001 | 99337 | NCCI | Standards of medical/surgical practice |
| P3001 | 99341 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99342 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99343 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99344 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99345 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99347 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99348 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99349 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99350 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99354 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99355 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99356 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99357 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99360 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99431 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99432 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99433 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99435 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99436 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99440 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99455 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99456 | NCCI | NCCI Standards of medical / surgical practice |
| P3001 | 99477 | NCCI | Standard preparation/monitoring services for anesthesia |
| P3001 | G0123 | NCCI | Misuse of column 2 code with column 1 code |
| P3001 | G0141 | NCCI | Standards of medical/surgical practice |
| P3001 | G0143 | NCCI | Misuse of column 2 code with column 1 code |
| P3001 | G0144 | NCCI | Misuse of column 2 code with column 1 code |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| P3001 | G0145 | NCCI | Misuse of column 2 code with column 1 code |
| P3001 | G0147 | NCCI | Misuse of column 2 code with column 1 code |
| P3001 | G0148 | NCCI | Misuse of column 2 code with column 1 code |
| P9011 | P9010 | NCCI | NCCI Mutually exclusive procedures |
| P9011 | P9021 | NCCI | NCCI Mutually exclusive procedures |
| P9011 | P9022 | NCCI | NCCI Mutually exclusive procedures |
| P9011 | P9039 | NCCI | NCCI Mutually exclusive procedures |
| P9022 | P9010 | NCCI | NCCI Mutually exclusive procedures |
| P9022 | P9016 | NCCI | NCCI Mutually exclusive procedures |
| P9022 | P9021 | NCCI | NCCI Mutually exclusive procedures |
| P9022 | P9039 | NCCI | NCCI Mutually exclusive procedures |
| P9032 | P9010 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9032 | P9011 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9032 | P9016 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9032 | P9019 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9032 | P9020 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9032 | P9021 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9032 | P9022 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9032 | P9031 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9032 | P9034 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9032 | P9035 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9032 | P9039 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9033 | P9010 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9033 | P9011 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9033 | P9016 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9033 | P9019 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9033 | P9020 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9033 | P9021 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9033 | P9022 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9033 | P9031 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9033 | P9034 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9033 | P9035 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9033 | P9039 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9036 | P9010 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9036 | P9011 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9036 | P9016 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9036 | P9019 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9036 | P9020 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9036 | P9021 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| P9036 | P9022 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9036 | P9031 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9036 | P9034 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9036 | P9035 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9036 | P9039 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9037 | P9010 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9037 | P9011 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9037 | P9016 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9037 | P9019 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9037 | P9020 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9037 | P9021 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9037 | P9022 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9037 | P9031 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9037 | P9034 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9037 | P9035 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9037 | P9039 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9038 | P9010 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9038 | P9011 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9038 | P9016 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9038 | P9019 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9038 | P9020 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9038 | P9021 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9038 | P9022 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9038 | P9031 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9038 | P9034 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9038 | P9035 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9038 | P9039 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9039 | P9010 | NCCI | NCCI Mutually exclusive procedures |
| P9039 | P9016 | NCCI | NCCI Mutually exclusive procedures |
| P9039 | P9021 | NCCI | NCCI Mutually exclusive procedures |
| P9040 | P9010 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9040 | P9011 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9040 | P9016 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9040 | P9019 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9040 | P9020 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9040 | P9021 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9040 | P9022 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9040 | P9031 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9040 | P9034 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| P9040 | P9035 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9040 | P9039 | NCCI | NCCI Misuse of Column 2 code with Column 1 code |
| P9612 | P9615 | NCCI | NCCI Mutually exclusive procedures |
| P9615 | P9615 | BCBST | Procedure redundant to itself. |
| Q0035 | Q0035 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| Q0083 | 36120 | Retained NCCI | Mutually exclusive procedures |
| Q0083 | 36140 | Retained NCCI | Mutually exclusive procedures |
| Q0083 | 96405 | Retained NCCI | Mutually exclusive procedures |
| Q0083 | 96406 | Retained NCCI | Mutually exclusive procedures |
| Q0083 | 96420 | Retained NCCI | Mutually exclusive procedures |
| Q0084 | 36120 | Retained NCCI | Mutually exclusive procedures |
| Q0084 | 36140 | Retained NCCI | Mutually exclusive procedures |
| Q0084 | 96420 | Retained NCCI | Mutually exclusive procedures |
| Q0084 | 96422 | Retained NCCI | Mutually exclusive procedures |
| Q0084 | 96423 | Retained NCCI | Mutually exclusive procedures |
| Q0084 | 96425 | Retained NCCI | Mutually exclusive procedures |
| Q0085 | 36120 | Retained NCCI | Mutually exclusive procedures |
| Q0085 | 36140 | Retained NCCI | Mutually exclusive procedures |
| Q0085 | 96405 | Retained NCCI | Mutually exclusive procedures |
| Q0085 | 96406 | Retained NCCI | Mutually exclusive procedures |
| Q0085 | 96420 | Retained NCCI | Mutually exclusive procedures |
| Q0085 | 96422 | Retained NCCI | Mutually exclusive procedures |
| Q0085 | 96423 | Retained NCCI | Mutually exclusive procedures |
| Q0085 | 96425 | Retained NCCI | Mutually exclusive procedures |
| Q0085 | Q0083 | Retained NCCI | Most extensive procedures |
| Q0085 | Q0084 | Retained NCCI | Most extensive procedures |
| Q0091 | 99300 | NCCI | Standards of medical/surgical practice |
| Q0091 | 99304 | NCCI | Standards of medical/surgical practice |
| Q0091 | 99305 | NCCI | Standards of medical/surgical practice |
| Q0091 | 99306 | NCCI | Standards of medical/surgical practice |
| Q0091 | 99307 | NCCI | Standards of medical/surgical practice |
| Q0091 | 99308 | NCCI | Standards of medical/surgical practice |
| Q0091 | 99309 | NCCI | Standards of medical/surgical practice |
| Q0091 | 99310 | NCCI | Standards of medical/surgical practice |
| Q0091 | 99318 | NCCI | Standards of medical/surgical practice |
| Q0091 | 99324 | NCCI | Standards of medical/surgical practice |
| Q0091 | 99325 | NCCI | Standards of medical/surgical practice |
| Q0091 | 99326 | NCCI | Standards of medical/surgical practice |

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| Q0091 | 99327 | NCCI | Standards of medical/surgical practice |
| Q0091 | 99328 | NCCI | Standards of medical/surgical practice |
| Q0091 | 99334 | NCCI | Standards of medical/surgical practice |
| Q0091 | 99335 | NCCI | Standards of medical/surgical practice |
| Q0091 | 99336 | NCCI | Standards of medical/surgical practice |
| Q0091 | 99337 | NCCI | Standards of medical/surgical practice |
| Q0091 | 99354 | NCCI | NCCI Standards of medical / surgical practice |
| Q0091 | 99355 | NCCI | NCCI Standards of medical / surgical practice |
| Q0091 | 99356 | NCCI | NCCI Standards of medical / surgical practice |
| Q0091 | 99357 | NCCI | NCCI Standards of medical / surgical practice |
| Q0091 | 99360 | NCCI | NCCI Standards of medical / surgical practice |
| Q0091 | 99431 | NCCI | NCCI Standards of medical / surgical practice |
| Q0091 | 99432 | NCCI | NCCI Standards of medical / surgical practice |
| Q0091 | 99433 | NCCI | NCCI Standards of medical / surgical practice |
| Q0091 | 99435 | NCCI | NCCI Standards of medical / surgical practice |
| Q0091 | 99436 | NCCI | NCCI Standards of medical / surgical practice |
| Q0091 | 99440 | NCCI | NCCI Standards of medical / surgical practice |
| Q0091 | 99455 | NCCI | NCCI Standards of medical / surgical practice |
| Q0091 | 99456 | NCCI | NCCI Standards of medical / surgical practice |
| Q0091 | 99477 | NCCI | Standard preparation/monitoring services for anesthesia |
| Q0091 | G0181 | NCCI | NCCI Standards of medical / surgical practice |
| Q0091 | G0182 | NCCI | NCCI Standards of medical / surgical practice |
| Q0111 | Q0111 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| Q0112 | Q0112 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| Q0113 | Q0113 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| Q0114 | Q0114 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| Q0115 | Q0115 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| Q1003 | Q1003 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| Q1003 | Q1004 | BCBST | NCCI Mutually exclusive procedures / The listed and edited codes are mutually exclusive in that typically only one lens is inserted. Both may be appropriate to reimburse if bilateral lens implants are performed during the same session. |
| Q1003 | Q1005 | BCBST | NCCI Mutually exclusive procedures / The listed and edited codes are mutually exclusive in that typically only one lens is inserted. Both may be appropriate to reimburse if bilateral lens implants are performed during the same session. |
| Q1004 | Q1004 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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| Q1004 | Q1005 | BCBST | NCCI Mutually exclusive procedures / The listed and edited codes are mutually exclusive in that typically only one lens is inserted. Both may be appropriate to reimburse if bilateral lens implants are performed during the same session. |
| Q1005 | Q1005 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| Q3014 | Q3014 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| Q3017 | A0433 | BCBST | Edited code not allowed if used to report advanced life support with the listed service. |
| Q3017 | Q3017 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| Q4097 | Q4097 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| R0075 | R0070 | NCCI | NCCI HCPCS/CPT procedure code definition |
| S0195 | S0195 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S0195 | S0195 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S0199 | S0199 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S0208 | S0208 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S0215 | S0215 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S0220 | S0220 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S0221 | S0221 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S0250 | S0250 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S0255 | S0255 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S0260 | S0260 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S0302 | S0302 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S0310 | S0310 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S0340 | S0340 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S0341 | S0341 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S0342 | S0342 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S0390 | 11055 | BCBST | This service, supply, or equipment is considered a component of the listed code or represents an alternative service, supply or equipment which is generally redundant to the listed code. |
| S0390 | 11056 | BCBST | This service, supply, or equipment is considered a component of the listed code or represents an alternative service, supply or equipment which is generally redundant to the listed code. |

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| S0390 | 11057 | BCBST | This service, supply, or equipment is considered a component of the listed code or represents an alternative service, supply or equipment which is generally redundant to the listed code. |
| S0390 | 11719 | BCBST | This service, supply, or equipment is considered a component of the listed code or represents an alternative service, supply or equipment which is generally redundant to the listed code. |
| S0390 | 11720 | BCBST | This service, supply, or equipment is considered a component of the listed code or represents an alternative service, supply or equipment which is generally redundant to the listed code. |
| S0390 | 11721 | BCBST | This service, supply, or equipment is considered a component of the listed code or represents an alternative service, supply or equipment which is generally redundant to the listed code. |
| S0390 | G0127 | BCBST | This service, supply, or equipment is considered a component of the listed code or represents an alternative service, supply or equipment which is generally redundant to the listed code. |
| S0390 | S0390 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S0395 | S0395 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S0400 | 50590 | BCBST | The edited code is considered an integral component of the listed code. |
| S0400 | S0400 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S0592 | S0592 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S0601 | S0601 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S0605 | S0605 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S0610 | S0610 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S0612 | S0612 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S0620 | S0620 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S0621 | S0621 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S0622 | S0622 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S0630 | S0630 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S0800 | S0800 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S0810 | S0810 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S0812 | S0812 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S0830 | S0830 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S1001 | S1001 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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| S1002 | S1002 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S1030 | S1030 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S1031 | S1031 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S2053 | S2053 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S2054 | S2054 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S2055 | S2055 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S2060 | S2060 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S2061 | S2061 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S2065 | S2065 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S2080 | S2080 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S2102 | S2102 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S2103 | S2103 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S2112 | S2112 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S2115 | S2115 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S2120 | S2120 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S2140 | S2140 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S2142 | S2142 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S2150 | 38205 | BCBST | The listed procedure includes cell harvesting. |
| S2150 | 38206 | BCBST | The listed procedure includes cell harvesting. |
| S2150 | S2150 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S2202 | S2202 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S2205 | S2205 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S2206 | S2206 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S2207 | S2207 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S2208 | S2208 | BCBST | Code redundant to self/should not be reported more than once due to standard description |

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|---------------------------|-----------------------|---------------|--|
| S2209 | S2209 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S2260 | S2260 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S2300 | S2300 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S2340 | S2340 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S2341 | S2341 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S2342 | S2342 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S2350 | S2350 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S2360 | S2360 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S2400 | S2400 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S2401 | S2401 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S2402 | S2402 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S2403 | S2403 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S2404 | S2404 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S2405 | S2405 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S2409 | S2409 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S2411 | S2411 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S3601 | S3601 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S3620 | S3620 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S3630 | S3630 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S3645 | S3645 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S3650 | S3650 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S3652 | S3652 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S3708 | S3708 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S3818 | S3818 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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| S3819 | S3819 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S3830 | S3830 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S3831 | S3831 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S3835 | S3835 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S3837 | S3837 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S3900 | S3900 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S3902 | S3902 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S3904 | S3904 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S4005 | S4005 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S4011 | S4011 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S4013 | S4013 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S4014 | S4014 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S4015 | S4015 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S4016 | S4016 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S4017 | S4017 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S4018 | S4018 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S4020 | S4020 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S4021 | S4021 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S4022 | S4022 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S4023 | S4023 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S4025 | S4025 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S4026 | S4026 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S4027 | S4027 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S4028 | S4028 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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| S4030 | S4030 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S4031 | S4031 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S4035 | S4035 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S4037 | S4037 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S4981 | S4981 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S4989 | S4989 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S4990 | S4990 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S4991 | S4991 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S5000 | S5000 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S5001 | S5001 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S5035 | S5035 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S5036 | S5036 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S5497 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S5497 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S5497 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S5497 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S5497 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S5497 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S5497 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S5497 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S5497 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S5497 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S5497 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S5497 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S5497 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S5497 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S5497 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S5497 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S5497 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S5497 | S5497 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S5497 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S5497 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S5497 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S5497 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S5497 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |

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|---------------------------|-----------------------|---------------|---|
| S5497 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S5497 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S5498 | SH A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S5498 | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S5498 | SH A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S5498 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S5498 | SJ A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S5498 | SJ A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S5498 | SJ B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S5498 SH | E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 SH | E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 SJ | E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 SJ | E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 SH | E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 SJ | E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 SH | E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 SJ | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 SH | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 SJ | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 SH | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 SH | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 SH | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 SJ | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 SJ | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 SH | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S5498 SJ E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SJ E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SH E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SJ E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SH E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SJ E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SH E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SH E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SJ E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SH E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SJ E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SH E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SJ E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SH E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SJ E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SJ E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
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| S5498 SH E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SJ E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SH E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SJ E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SH E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SJ E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SH E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SJ E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SJ E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SH E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SH E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SH E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SJ E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SJ E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SH E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S5498 SH E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |

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|---------------------------|-----------------------|---------------|---|
| S5498 | E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S5498 | E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SH S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | SJ S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5498 | S5498 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S5498 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S5498 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S5498 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S5498 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S5498 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S5498 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |

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| S5498 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S5501 | SJ A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S5501 | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S5501 | SH A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S5501 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S5501 | SJ A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S5501 | A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S5501 | SJ B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S5501 | SJ E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S5501 | SJ E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S5501 | E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|--------------------|----|----------------|----|--------|---|
| S5501 | SJ | E0785 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | | E0785 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH | E0785 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ | E0785 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ | E0785 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | | E0785 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH | E0785 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ | E0785 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH | E0785 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | | E0785 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ | E0786 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH | E0786 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ | E0786 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | | E0786 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | | E0786 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH | E0786 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ | E0786 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH | E0786 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | | E0786 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH | E0786 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | | E0786 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ | E0786 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH | E0791 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | | E0791 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|--|
| S5501 | SJ E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SJ S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | SH S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5501 | S5498 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S5501 | S5501 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S5501 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S5501 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S5501 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S5501 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S5501 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S5501 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |

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| S5501 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S5502 | SJ A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S5502 | SH A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S5502 | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S5502 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S5502 | SJ A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S5502 | SJ A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S5502 | B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S5502 | SH E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|--------------------|----|----------------|----|--------|---|
| S5502 | SH | E0781 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ | E0781 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ | E0781 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | | E0781 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH | E0781 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | | E0781 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH | E0781 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | | E0781 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH | E0781 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ | E0781 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ | E0782 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | | E0782 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH | E0782 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | | E0782 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH | E0782 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ | E0782 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ | E0782 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | | E0782 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH | E0782 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ | E0782 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | | E0782 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH | E0782 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | | E0783 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH | E0783 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S5502 | E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S5502 | SH | E0785 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | | E0785 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH | E0785 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | | E0785 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | | E0785 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ | E0785 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ | E0785 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH | E0785 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ | E0785 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH | E0785 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | | E0786 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH | E0786 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ | E0786 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | | E0786 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ | E0786 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | | E0786 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | | E0786 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ | E0786 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH | E0786 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SJ | E0786 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH | E0786 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH | E0786 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | | E0791 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | SH | E0791 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S5502 SH | E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 SJ | E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 SH | E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 SJ | E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 SJ | E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 SH | E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 SJ | E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 SH | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 SJ | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 SH | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 SJ | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S5502 | S5498 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S5502 | S5501 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S5502 | S5502 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S5502 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S5502 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S5502 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S5502 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S5502 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| S5502 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S5502 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S5517 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5517 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5517 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5517 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5517 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5517 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5517 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5517 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5517 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5517 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5517 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5517 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5517 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5517 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5517 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5517 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |

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|---------------------------|-----------------------|---------------|---|
| S5517 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5517 | S5517 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S5518 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5518 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5518 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5518 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5518 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5518 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5518 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5518 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5518 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5518 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5518 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5518 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5518 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5518 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5518 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |

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|---------------------------|-----------------------|---------------|---|
| S5518 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5518 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5518 | S5518 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S5520 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5520 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5520 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5520 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5520 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5520 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5520 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5520 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5520 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5520 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5520 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5520 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5520 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5520 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5520 | A4300 | BCBST | Edited code not allowed if used to report the catheter included in the listed supply. |
| S5520 | A4301 | BCBST | Edited code not allowed if used to report the catheter included in the listed supply. |

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|---------------------------|-----------------------|---------------|---|
| S5520 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5520 | C1751 | BCBST | Edited code not allowed if used to report the catheter included in the listed supply. |
| S5520 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5520 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5520 | S5520 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S5521 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5521 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5521 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5521 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5521 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5521 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5521 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5521 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5521 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5521 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5521 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5521 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5521 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |

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|---------------------------|-----------------------|---------------|---|
| S5521 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5521 | A4300 | BCBST | Edited code not allowed if used to report the catheter included in the listed supply. |
| S5521 | A4301 | BCBST | Edited code not allowed if used to report the catheter included in the listed supply. |
| S5521 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5521 | C1751 | BCBST | Edited code not allowed if used to report the catheter included in the listed supply. |
| S5521 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5521 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, this service includes all necessary supplies. |
| S5521 | S5521 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S5522 | S5522 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S5523 | S5523 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S8030 | S8030 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S8035 | S8035 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S8037 | S8037 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S8040 | S8040 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S8042 | S8042 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S8049 | S8049 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S8055 | S8055 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S8085 | S8085 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S8092 | S8092 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S8095 | S8095 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S8096 | S8096 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S8097 | S8096 | BCBST | The edited code is considered an integral component of the listed code. |
| S8097 | S8097 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S8100 | S8100 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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|---------------------------|-----------------------|---------------|--|
| S8101 | S8101 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S8181 | S8181 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S8185 | S8185 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S8186 | S8186 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S8189 | S8189 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S8190 | S8190 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S8210 | S8210 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S8999 | S8999 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9001 | S9001 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9007 | S9007 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9015 | S9015 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S9024 | S9024 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9025 | S9025 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9034 | S9034 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9055 | S9055 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9056 | S9056 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9061 | S9061 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9061 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9075 | S9075 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9083 | S9083 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9088 | S9088 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9090 | S9090 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9092 | S9092 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9098 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary solutions, equipment, and supplies (except drugs). |

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|---------------------------|-----------------------|---------------|--|
| S9098 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary solutions, equipment, and supplies (except drugs). |
| S9098 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary solutions, equipment, and supplies (except drugs). |
| S9098 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary solutions, equipment, and supplies (except drugs). |
| S9098 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary solutions, equipment, and supplies (except drugs). |
| S9098 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary solutions, equipment, and supplies (except drugs). |
| S9098 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary solutions, equipment, and supplies (except drugs). |
| S9098 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary solutions, equipment, and supplies (except drugs). |
| S9098 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary solutions, equipment, and supplies (except drugs). |
| S9098 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary solutions, equipment, and supplies (except drugs). |
| S9098 | S9098 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9109 | S9109 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9117 | S9117 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9125 | S9125 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9126 | S9126 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9127 | S9127 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9128 | S9128 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S9129 | S9129 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| S9131 | S9131 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9140 | S9140 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9141 | S9141 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9145 | S9145 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9150 | S9150 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9208 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9208 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9208 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9208 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9208 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9208 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9208 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9208 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9208 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9208 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9208 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9208 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9208 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9208 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9208 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9208 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9208 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9208 | S9208 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9208 | S9325 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9208 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9209 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9209 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9209 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9209 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9209 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9209 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9209 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9209 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9209 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9209 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9209 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9209 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9209 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9209 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9209 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9209 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9209 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9209 | S9209 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9209 | S9325 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9209 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9211 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9211 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9211 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9211 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9211 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9211 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9211 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9211 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9211 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9211 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9211 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9211 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9211 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9211 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9211 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9211 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9211 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9211 | S9211 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9211 | S9325 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9211 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9212 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9212 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9212 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9212 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9212 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9212 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9212 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9212 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9212 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9212 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9212 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9212 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9212 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9212 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9212 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9212 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9212 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9212 | S9212 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9212 | S9325 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9212 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9213 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9213 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9213 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9213 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9213 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9213 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9213 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9213 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9213 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9213 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9213 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9213 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9213 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9213 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9213 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9213 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9213 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9213 | S9213 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9213 | S9325 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9213 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9214 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9214 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9214 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9214 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9214 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9214 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|--|
| S9214 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9214 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9214 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9214 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9214 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9214 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9214 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9214 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9214 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9214 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9214 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9214 | S9214 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9214 | S9325 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9214 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9325 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9325 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9325 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9325 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9325 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9325 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9325 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9325 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9325 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9325 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9325 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9325 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9325 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9325 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9325 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9325 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9325 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9325 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9325 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9325 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9325 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9325 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9325 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9325 | S9325 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9325 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9326 | A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|------------------|---|
| S9326 | SJ | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9326 | SH A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9326 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9326 | SJ A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9326 | SJ A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S9326 SH | B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9326 | E0776 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9326 | E0776 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9326 | SJ | E0776 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ | E0776 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ | E0776 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH | E0776 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH | E0779 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | | E0779 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ | E0779 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ | E0779 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ | E0779 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH | E0779 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | | E0779 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH | E0779 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ | E0779 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH | E0779 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | | E0779 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | | E0779 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ | E0780 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | | E0780 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH | E0780 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH | E0780 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ | E0780 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | | E0780 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9326 SH | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9326 SH | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| S9326 SH | E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SJ | E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 SH | E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S9326 | E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SJ S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | SH S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9326 | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S9326 | S5498 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9326 | S5501 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9326 | S5502 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9326 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9326 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9326 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9326 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9326 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9326 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9326 | S9325 | BCBST | The edited home infusion therapy code is considered redundant to or an integral component of the listed code in that it provides services to the patient already provided by the listed service with little or no significant additional benefit. |
| S9326 | S9326 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9326 | S9327 | BCBST | The edited home infusion therapy code is considered redundant to or an integral component of the listed code in that it provides services to the patient already provided by the listed service with little or no significant additional benefit. |
| S9326 | S9328 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9326 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9327 | A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9327 | SJ | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9327 | SH A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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| S9327 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9327 | SJ A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9327 | SJ B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| S9327 SH | E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SJ | E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SH | E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SJ | E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SH | E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SJ | E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SH | E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SJ | E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SH | E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SJ | E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SJ | E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SH | E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SH | E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SH | E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SJ | E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SH | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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Commercial and Medicaid Code Bundling Rules

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|--------------------|----------------|--------|---|
| S9327 | SJ E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S9327 SH | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SJ | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SJ | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SH | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SJ | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SJ | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SH | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SH | E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SJ | E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SH | E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SH | E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SJ | E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SJ | E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SJ | E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SH | E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SJ | E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9327 SH | E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SJ | E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SJ | E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SH | E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SH | E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SH | E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SJ | E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SJ | E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SH | E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SJ | E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SH | E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SJ | E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SH | E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SJ | E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SH | E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 SH | E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9327 | SJ E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9327 | SJ S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SH S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | SJ S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9327 | S5498 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9327 | S5501 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9327 | S5502 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9327 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9327 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9327 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9327 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9327 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9327 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9327 | S9325 | BCBST | The edited home infusion therapy code is considered redundant to or an integral component of the listed code in that it provides services to the patient already provided by the listed service with little or no significant additional benefit. |
| S9327 | S9326 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9327 | S9327 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9327 | S9328 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9327 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9328 | SJ A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9328 | SJ | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9328 | SH A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| Comprehensive Code | Component Code | Source | Rationale |
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| S9328 | SJ A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9328 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9328 | SJ A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9328 | SH B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9328 | SJ B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9328 SH | E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 SJ | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 SH | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 SH | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 SH | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 SJ | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 SH | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 SJ | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 SJ | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 SH | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 SH | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 SH | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 SJ | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 SH | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 SJ | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
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| S9328 | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9328 | E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9328 SH E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9328 E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9328 SH E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9328 SJ E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9328 SH E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9328 SJ E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9328 SH E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9328 E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9328 E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9328 E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9328 SH E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9328 SJ E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9328 SH E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9328 SJ E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9328 E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9328 SJ E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9328 E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9328 SH E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9328 SJ E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9328 E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9328 E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9328 E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9328 SJ E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9328 SJ E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| S9328 | SH E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SH S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | SJ S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9328 | S5498 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9328 | S5501 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9328 | S5502 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9328 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9328 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9328 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9328 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9328 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9328 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9328 | S9325 | BCBST | The edited home infusion therapy code is considered redundant to or an integral component of the listed code in that it provides services to the patient already provided by the listed service with little or no significant additional benefit. |
| S9328 | S9326 | BCBST | The edited home infusion therapy code is considered redundant to or an integral component of the listed code in that it provides services to the patient already provided by the listed service with little or no significant additional benefit. |
| S9328 | S9327 | BCBST | The edited home infusion therapy code is considered redundant to or an integral component of the listed code in that it provides services to the patient already provided by the listed service with little or no significant additional benefit. |
| S9328 | S9328 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9328 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|--|
| S9329 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9329 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9329 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9329 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9329 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9329 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9329 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9329 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9329 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9329 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9329 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9329 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9329 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9329 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9329 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9329 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9329 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9329 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9329 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9329 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9329 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9329 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9329 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9329 | S9329 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9329 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9330 | SJ A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| Comprehensive Code | Component Code | Source | Rationale | |
|---------------------------|-----------------------|---------------|------------------|---|
| S9330 | SJ | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| Comprehensive Code | Component Code | Source | Rationale | |
|---------------------------|-----------------------|---------------|------------------|---|
| S9330 | SH | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9330 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9330 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9330 | A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | | Component Code | | Source | Rationale |
|--------------------|----|----------------|----|--------|---|
| S9330 | SJ | B9004 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH | B9004 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | | B9004 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | | B9004 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH | B9004 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ | B9004 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH | B9004 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ | B9004 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | | B9004 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH | B9004 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | | B9004 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ | B9004 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH | B9006 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH | B9006 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH | B9006 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | | B9006 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ | B9006 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ | B9006 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ | B9006 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH | B9006 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ | B9006 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | | B9006 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | | B9006 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | | B9006 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S9330 | SJ E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9330 | SJ E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|---|
| S9330 | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S9330 | SH E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S9330 | SJ E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| Comprehensive Code | Component Code | Source | Rationale |
|--------------------|----------------|--------|---|
| S9330 | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SH S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | SJ S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9330 | S5498 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9330 | S5501 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9330 | S5502 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9330 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9330 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9330 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9330 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9330 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9330 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9330 | S9329 | BCBST | The edited home infusion therapy code is considered redundant to or an integral component of the listed code in that it provides services to the patient already provided by the listed service with little or no significant additional benefit. |
| S9330 | S9330 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9330 | S9331 | BCBST | The edited home infusion therapy code is considered redundant to or an integral component of the listed code in that it provides services to the patient already provided by the listed service with little or no significant additional benefit. |
| S9330 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9331 | A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9331 | SJ | A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9331 | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9331 | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9331 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9331 | A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S9331 | SJ B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S9331 | B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9331 SJ E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SH E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SH E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SH E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SJ E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SJ E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SH E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SJ E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SH E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SJ E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SH E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SJ E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SH E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SH E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SJ E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SH E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |

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| S9331 | SJ E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9331 SJ E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SH E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SJ E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SJ E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SH E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SH E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SJ E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SH E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SJ E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SH E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SJ E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SH E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SJ E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SJ E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 SH E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9331 E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |

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| S9331 | SJ E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9331 | SH E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SH S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | SJ S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9331 | S5498 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9331 | S5501 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9331 | S5502 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9331 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9331 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9331 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9331 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9331 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9331 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9331 | S9329 | BCBST | The edited home infusion therapy code is considered redundant to or an integral component of the listed code in that it provides services to the patient already provided by the listed service with little or no significant additional benefit. |
| S9331 | S9330 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9331 | S9331 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9331 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9336 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9336 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9336 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9336 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9336 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9336 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9336 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9336 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9336 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9336 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9336 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9336 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9336 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9336 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9336 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9336 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9336 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9336 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9336 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9336 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9336 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9336 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9336 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9336 | S9336 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9336 | S9372 | BCBST | The edited home infusion therapy code is considered redundant to or an integral component of the listed code in that it provides services to the patient already provided by the listed service with little or no significant additional benefit. |
| S9336 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9338 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9338 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9338 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9338 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9338 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9338 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9338 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9338 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9338 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9338 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9338 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9338 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9338 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9338 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9338 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9338 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9338 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9338 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9338 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9338 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9338 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9338 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9338 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9338 | S9338 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9338 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9339 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9339 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9339 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9339 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9339 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9339 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9339 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9339 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9339 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9339 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9339 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9339 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9339 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9339 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9339 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9339 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9339 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9339 | S9339 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9339 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9340 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9340 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9340 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9340 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9340 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9340 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9340 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9340 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9340 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9340 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9340 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |

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| S9340 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9340 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9340 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9340 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9340 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9340 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9340 | S9340 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9340 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9341 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9341 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9341 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9341 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9341 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9341 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9341 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9341 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9341 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9341 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |

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| S9341 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9341 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9341 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9341 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9341 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9341 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9341 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9341 | S9340 | BCBST | The edited home therapy code is considered redundant to or an integral component of the listed code in that it provides services to the patient already provided by the listed service with little or no significant additional benefit. |
| S9341 | S9341 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9341 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9342 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9342 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9342 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9342 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9342 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9342 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9342 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9342 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9342 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9342 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9342 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9342 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9342 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9342 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9342 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9342 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9342 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9342 | S9340 | BCBST | The edited home therapy code is considered redundant to or an integral component of the listed code in that it provides services to the patient already provided by the listed service with little or no significant additional benefit. |
| S9342 | S9341 | BCBST | The edited home therapy code is considered redundant to or an integral component of the listed code in that it provides services to the patient already provided by the listed service with little or no significant additional benefit. |
| S9342 | S9342 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9342 | S9343 | BCBST | The edited home therapy code is considered redundant to or an integral component of the listed code in that it provides services to the patient already provided by the listed service with little or no significant additional benefit. |
| S9342 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9343 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9343 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9343 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9343 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9343 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9343 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9343 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9343 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9343 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9343 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9343 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9343 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9343 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9343 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9343 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9343 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9343 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except enteral formula). |
| S9343 | S9340 | BCBST | The edited home therapy code is considered redundant to or an integral component of the listed code in that it provides services to the patient already provided by the listed service with little or no significant additional benefit. |
| S9343 | S9341 | BCBST | The edited home therapy code is considered redundant to or an integral component of the listed code in that it provides services to the patient already provided by the listed service with little or no significant additional benefit. |
| S9343 | S9343 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9343 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |

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Print Date: 08/11/2008

BlueCross BlueShield of Tennessee-Coding Bundling Rules

Source: PNC-CARR

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9345 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9345 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9345 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9345 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9345 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9345 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9345 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9345 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9345 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9345 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9345 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9345 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9345 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9345 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9345 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9345 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9345 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9345 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9345 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9345 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9345 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9345 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9345 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9345 | S9345 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9345 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9346 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9346 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9346 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9346 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9346 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9346 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9346 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9346 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9346 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9346 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9346 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9346 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9346 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9346 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9346 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9346 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9346 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9346 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9346 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9346 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9346 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9346 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9346 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9346 | S9346 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9346 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9347 | SH A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale | |
|---------------------------|-----------------------|---------------|------------------|---|
| S9347 | SJ | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9347 | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9347 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9347 | SJ A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| Comprehensive Code | Component Code | Source | Rationale |
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| S9347 | SH A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---|------------------|
| S9347 SH B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SH B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SJ B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SH B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SH B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SJ B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SH B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SJ B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SJ B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SH E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SH E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SJ E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SJ E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SH E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SJ E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SH E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |

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| S9347 | SJ E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9347 SH | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SJ | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SH | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SJ | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SJ | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SH | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SH | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SJ | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SH | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SJ | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SJ | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SH | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SJ | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SH | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SJ | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SH | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9347 SJ E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SH E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SJ E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SJ E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SJ E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SH E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SH E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SH E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SJ E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SH E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SH E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SJ E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SJ E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SH E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SH E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SJ E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9347 SH E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |

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| S9347 | SJ E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SJ E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | SH E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9347 SH | E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SJ | E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SH | E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SJ | E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SH | E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SJ | E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SH | E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SJ | E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SH | E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SJ | E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SH | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SJ | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SH | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 SJ | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9347 | S5498 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9347 | S5501 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9347 | S5502 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9347 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |

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| S9347 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9347 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9347 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9347 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9347 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9347 | S9347 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9347 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9348 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9348 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9348 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9348 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9348 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9348 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9348 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9348 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9348 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9348 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9348 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9348 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9348 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9348 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9348 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9348 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9348 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9348 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9348 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9348 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9348 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9348 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9348 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9348 | S9348 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9348 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9349 | SJ A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S9349 | SH A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9349 | SH A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|--|
| S9349 | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9349 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9349 | A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9349 | B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9349 | SH | B9006 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | | B9006 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ | B9006 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | | B9006 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ | B9006 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH | B9006 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH | B9006 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | | E0776 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ | E0776 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | | E0776 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH | E0776 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ | E0776 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH | E0776 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ | E0776 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH | E0776 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ | E0776 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH | E0776 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | | E0776 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | | E0776 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | | E0779 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH | E0779 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ | E0779 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ | E0779 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH | E0779 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9349 | E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| S9349 | SJ E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| S9349 | E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S9349 | E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|--|
| S9349 | E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SJ S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | SH S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9349 | S5498 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9349 | S5501 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9349 | S5502 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9349 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9349 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9349 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9349 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9349 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9349 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9349 | S9326 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9349 | S9327 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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|---------------------------|-----------------------|---------------|--|
| S9349 | S9328 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9349 | S9330 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9349 | S9331 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9349 | S9347 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9349 | S9349 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9349 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9351 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9351 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9351 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9351 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9351 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9351 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9351 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9351 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9351 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9351 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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|---------------------------|-----------------------|---------------|--|
| S9351 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9351 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9351 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9351 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9351 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9351 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9351 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9351 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9351 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9351 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9351 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9351 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9351 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9351 | S9351 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9351 | S9370 | BCBST | The edited code is considered an integral component of the listed code. |
| S9351 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9353 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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| S9353 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9353 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9353 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9353 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9353 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9353 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9353 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9353 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9353 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9353 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9353 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9353 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9353 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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| S9353 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9353 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9353 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9353 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9353 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9353 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9353 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9353 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9353 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9353 | S9353 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9353 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9355 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9355 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9355 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9355 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9355 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9355 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9355 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9355 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9355 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9355 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9355 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9355 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9355 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9355 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9355 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9355 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9355 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9355 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9355 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9355 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9355 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9355 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9355 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9355 | S9355 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9355 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9357 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9357 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9357 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9357 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9357 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9357 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9357 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9357 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9357 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9357 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9357 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9357 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9357 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9357 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9357 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9357 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9357 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9357 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9357 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9357 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9357 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9357 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9357 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9357 | S9357 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9357 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9359 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9359 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9359 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9359 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9359 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9359 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9359 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9359 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9359 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9359 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9359 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9359 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9359 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9359 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9359 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9359 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9359 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9359 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9359 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9359 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9359 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9359 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9359 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9359 | S9359 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9359 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9361 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9361 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9361 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9361 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9361 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9361 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9361 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9361 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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| S9361 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9361 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9361 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9361 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9361 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9361 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9361 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9361 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9361 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9361 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9361 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9361 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9361 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9361 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9361 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9361 | S9361 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9361 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9363 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9363 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9363 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9363 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9363 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9363 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9363 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9363 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9363 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9363 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9363 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9363 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9363 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9363 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9363 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9363 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9363 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9363 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9363 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9363 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9363 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9363 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9363 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9363 | S9363 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9363 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9364 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9364 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9364 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9364 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9364 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9364 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9364 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9364 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9364 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9364 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9364 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9364 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9364 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9364 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9364 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9364 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9364 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9364 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9364 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9364 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9364 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9364 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9364 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9364 | S9364 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9364 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9365 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9365 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9365 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9365 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9365 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9365 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9365 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9365 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9365 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9365 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9365 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9365 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9365 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9365 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9365 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9365 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9365 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9365 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9365 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9365 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9365 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9365 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9365 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9365 | S9364 | BCBST | The edited code is considered an integral component of the listed code. |
| S9365 | S9365 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9365 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9366 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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Source: PNC-CARR

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9366 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9366 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9366 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9366 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9366 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9366 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9366 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9366 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9366 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9366 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9366 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9366 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9366 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9366 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9366 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9366 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9366 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9366 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9366 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9366 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9366 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9366 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9366 | S9364 | BCBST | The edited code is considered an integral component of the listed code. |
| S9366 | S9365 | BCBST | The edited home infusion therapy code is considered an integral component of the listed code. |
| S9366 | S9366 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9366 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9367 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9367 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9367 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9367 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9367 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9367 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9367 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9367 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9367 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9367 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9367 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9367 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9367 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9367 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9367 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9367 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9367 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9367 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9367 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9367 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9367 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9367 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9367 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9367 | S9364 | BCBST | The edited code is considered an integral component of the listed code. |
| S9367 | S9365 | BCBST | The edited home infusion therapy code is considered an integral component of the listed code. |
| S9367 | S9366 | BCBST | The edited home infusion therapy code is considered an integral component of the listed code. |
| S9367 | S9367 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9367 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9368 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9368 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9368 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9368 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9368 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9368 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9368 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9368 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9368 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9368 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9368 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9368 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9368 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9368 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9368 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9368 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9368 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9368 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9368 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9368 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9368 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9368 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9368 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9368 | S9364 | BCBST | The edited code is considered an integral component of the listed code. |
| S9368 | S9365 | BCBST | The edited home infusion therapy code is considered an integral component of the listed code. |
| S9368 | S9366 | BCBST | The edited home infusion therapy code is considered an integral component of the listed code. |
| S9368 | S9367 | BCBST | The edited home infusion therapy code is considered an integral component of the listed code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9368 | S9368 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9368 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9370 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9370 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9370 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9370 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9370 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9370 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9370 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9370 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9370 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9370 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9370 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9370 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9370 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9370 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9370 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9370 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9370 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9370 | S9370 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9370 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9372 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9372 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9372 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9372 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9372 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9372 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9372 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9372 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9372 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9372 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9372 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9372 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9372 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9372 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9372 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9372 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9372 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9372 | S9372 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9372 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9373 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9373 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9373 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9373 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9373 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9373 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9373 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9373 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9373 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9373 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9373 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9373 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9373 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9373 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9373 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9373 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9373 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9373 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9373 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9373 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9373 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9373 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9373 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9373 | S9373 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9373 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9374 | SJ A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|---|
| S9374 | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S9374 | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|--|
| S9374 | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9374 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9374 | SH A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|---|
| S9374 | SJ B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|---|
| S9374 | SJ B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| S9374 SJ | E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SH | E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SH | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SH | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SH | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SJ | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SJ | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SH | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SJ | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SJ | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SH | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SJ | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SH | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SJ | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SJ | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SH | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SH | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S9374 | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9374 SH | E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SJ | E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SH | E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SH | E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SJ | E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SH | E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SJ | E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SH | E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SH | E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SJ | E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SJ | E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SJ | E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SH | E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SH | E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SJ | E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SH | E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9374 | SH E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SH E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | SJ E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|--|
| S9374 SH | E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SJ | E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SJ | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SH | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SJ | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 SH | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9374 | S5498 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9374 | S5501 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9374 | S5502 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9374 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9374 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9374 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9374 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9374 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9374 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9374 | S9373 | BCBST | The edited code is considered an integral component of the listed code. |
| S9374 | S9374 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9374 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9375 SH | A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 SJ | A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S9375 | SH A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S9375 | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|--|
| S9375 | SH A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9375 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9375 | SH A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S9375 | SH B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9375 | B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9375 | E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9375 | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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Source: PNC-CARR

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|---|
| S9375 | SJ E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9375 | E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9375 | SJ E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SH S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | SJ S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9375 | S5498 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9375 | S5501 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9375 | S5502 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9375 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9375 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9375 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9375 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9375 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9375 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9375 | S9373 | BCBST | The edited code is considered an integral component of the listed code. |
| S9375 | S9374 | BCBST | The edited home infusion therapy code is considered an integral component of the listed code. |
| S9375 | S9375 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9375 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9376 | SJ A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9376 | SH A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9376 | SH A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9376 | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9376 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9376 | A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9376 | SH B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9376 | B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| S9376 | SJ E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| S9376 | SH E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| S9376 | SH E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---|------------------|
| S9376 SJ E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9376 E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9376 SH E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9376 SJ E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9376 E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9376 SH E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9376 E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9376 E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9376 SH E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9376 SJ E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9376 SH E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9376 SJ E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9376 E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9376 E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9376 SJ E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9376 E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9376 SH E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9376 E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9376 SJ E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9376 SH E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9376 SH E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9376 E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9376 E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9376 SJ E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|--|
| S9376 | SJ E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SH S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | SJ S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9376 | S5498 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9376 | S5501 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9376 | S5502 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9376 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9376 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9376 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9376 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9376 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9376 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9376 | S9373 | BCBST | The edited code is considered an integral component of the listed code. |
| S9376 | S9374 | BCBST | The edited home infusion therapy code is considered an integral component of the listed code. |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9376 | S9375 | BCBST | The edited home infusion therapy code is considered an integral component of the listed code. |
| S9376 | S9376 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9376 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9377 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9377 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9377 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9377 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9377 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9377 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9377 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9377 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9377 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9377 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9377 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9377 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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| S9377 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9377 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9377 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9377 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9377 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9377 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9377 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9377 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9377 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9377 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9377 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9377 | S9373 | BCBST | The edited code is considered an integral component of the listed code. |
| S9377 | S9374 | BCBST | The edited home infusion therapy code is considered an integral component of the listed code. |
| S9377 | S9375 | BCBST | The edited home infusion therapy code is considered an integral component of the listed code. |
| S9377 | S9376 | BCBST | The edited home infusion therapy code is considered an integral component of the listed code. |
| S9377 | S9377 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9377 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9379 | SH A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9379 | SJ | A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | | A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9379 | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9379 | SH A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9379 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9379 | SH A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9379 | SH B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9379 SH B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9379 B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9379 SH B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9379 SJ B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9379 B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9379 SH E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9379 E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9379 SJ E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9379 SJ E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9379 E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9379 SH E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9379 SJ E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9379 E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9379 E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9379 SH E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9379 SH E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9379 SJ E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9379 SJ E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9379 E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9379 SH E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9379 E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9379 E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9379 SJ E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9379 SH E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |

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| S9379 | SH E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9379 | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9379 | SJ E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S9379 | SJ E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|--|
| S9379 | E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SJ S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | SH S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9379 | S5498 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9379 | S5501 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9379 | S5502 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9379 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9379 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9379 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9379 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9379 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9379 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9379 | S9326 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9379 | S9327 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9379 | S9328 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9379 | S9330 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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|---------------------------|-----------------------|---------------|--|
| S9379 | S9331 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9379 | S9347 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9379 | S9349 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9379 | S9374 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9379 | S9375 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9379 | S9376 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9379 | S9379 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9379 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9381 | S9381 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9401 | S9401 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9430 | S9430 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9435 | S9435 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9436 | S9436 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9437 | S9437 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9438 | S9438 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9439 | S9439 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9441 | S9441 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9442 | S9442 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9443 | S9443 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9444 | S9444 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9445 | S9445 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9446 | S9446 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9447 | S9447 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9449 | S9449 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Print Date: 08/11/2008

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Source: PNC-CARR

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9451 | S9451 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9452 | S9452 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9453 | S9453 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9454 | S9454 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9455 | S9455 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9460 | S9460 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9465 | S9465 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9470 | S9470 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9472 | S9472 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9473 | S9473 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9474 | S9474 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9475 | S9475 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9480 | S9480 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9485 | S9485 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9494 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9494 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9494 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9494 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9494 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9494 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9494 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9494 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9494 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9494 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9494 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9494 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9494 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9494 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9494 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9494 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9494 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9494 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9494 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9494 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9494 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |

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| S9494 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9494 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9494 | S9497 | BCBST | The edited code is a component of the listed code. The listed code should not be used with the edited code, as per the descriptor for the listed code. |
| S9494 | S9500 | BCBST | The edited code is a component of the listed code. The listed code should not be used with the edited code, as per the descriptor for the listed code. |
| S9494 | S9501 | BCBST | The edited code is a component of the listed code. The listed code should not be used with the edited code, as per the descriptor for the listed code. |
| S9494 | S9502 | BCBST | The edited code is a component of the listed code. The listed code should not be used with the edited code, as per the descriptor for the listed code. |
| S9494 | S9503 | BCBST | The edited code is a component of the listed code. The listed code should not be used with the edited code, as per the descriptor for the listed code. |
| S9494 | S9504 | BCBST | The edited code is a component of the listed code. The listed code should not be used with the edited code, as per the descriptor for the listed code. |
| S9494 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9497 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9497 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9497 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9497 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9497 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9497 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9497 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9497 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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| S9497 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9497 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9497 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9497 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9497 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9497 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9497 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9497 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9497 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9497 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9497 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9497 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9497 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9497 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9497 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9497 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9500 | A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9500 | SH A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9500 | SJ | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9500 | SH A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9500 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9500 | SH A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9500 | SJ B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9500 | SJ B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9500 SJ | E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SH | E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SH | E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SJ | E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SJ | E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SH | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SJ | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SJ | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SH | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SH | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SJ | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SH | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SJ | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SH | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SJ | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9500 SH | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SJ | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SH | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SH | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SJ | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SJ | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SJ | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SH | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SJ | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SJ | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SH | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SH | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SH | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SJ | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SJ | E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 SH | E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9500 | SH | E0783 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ | E0783 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH | E0783 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ | E0783 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | | E0783 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH | E0783 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | | E0783 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ | E0783 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH | E0784 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | | E0784 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | | E0784 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH | E0784 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ | E0784 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | | E0784 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ | E0784 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH | E0784 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | | E0784 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH | E0784 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ | E0784 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ | E0784 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH | E0785 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | | E0785 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ | E0785 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH | E0785 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| S9500 | E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9500 | E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SH S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | SJ S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9500 | S5498 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9500 | S5501 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9500 | S5502 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9500 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9500 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9500 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9500 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9500 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9500 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9500 | S9500 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| S9500 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9501 | SJ A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale | |
|---------------------------|-----------------------|---------------|------------------|---|
| S9501 | SJ | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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Print Date: 08/11/2008

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Source: PNC-CARR

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale | |
|---------------------------|-----------------------|---------------|------------------|--|
| S9501 | SJ | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9501 | | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9501 | SJ | A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | | A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH | A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | | A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH | A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ | A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH | A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ | A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | | A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | | A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH | A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S9501 | SJ A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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Commercial and Medicaid Code Bundling Rules

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| S9501 | B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9501 | SJ E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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Print Date: 08/11/2008

BlueCross BlueShield of Tennessee-Coding Bundling Rules

Source: PNC-CARR

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| S9501 SH | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 SH | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 SJ | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 SH | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 SH | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 SJ | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 SJ | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 SJ | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 SH | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 SJ | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 SH | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 SJ | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 SJ | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 SH | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 SH | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---|------------------|
| S9501 SH E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9501 SJ E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9501 SH E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9501 SH E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9501 SJ E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9501 SJ E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9501 SH E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9501 E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9501 E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9501 SJ E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9501 E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9501 SJ E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9501 SH E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9501 E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9501 SH E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9501 SJ E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9501 SH E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9501 E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9501 SJ E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9501 SH E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9501 E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9501 SJ E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9501 SJ E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9501 SH E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|---|
| S9501 | E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|--|
| S9501 | SJ E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SH S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | SJ S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9501 | S5498 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9501 | S5501 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9501 | S5502 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9501 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9501 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9501 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9501 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9501 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9501 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9501 | S9500 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9501 | S9501 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9501 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9502 | A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9502 | SH A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9502 | SH A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9502 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9502 | A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S9502 | SJ A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| Comprehensive Code | Component Code | Source | Rationale |
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| S9502 | B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S9502 | SJ E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S9502 | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9502 | SH E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9502 | E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9502 | SJ E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SH S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | SJ S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9502 | S5498 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9502 | S5501 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9502 | S5502 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9502 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9502 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |

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| S9502 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9502 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9502 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9502 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9502 | S9500 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9502 | S9501 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9502 | S9502 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9502 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9503 | SJ A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale | |
|---------------------------|-----------------------|---------------|------------------|---|
| S9503 | SJ | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9503 | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9503 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9503 | A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S9503 | A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9503 SH | B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 SJ | B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 SH | B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 SJ | B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 SH | B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 SH | B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 SJ | B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 SJ | B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 SH | B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 SJ | B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 SH | E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 SJ | E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 SH | E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 SJ | E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 SH | E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S9503 | E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9503 | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9503 | SH | E0782 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | | E0782 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ | E0782 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH | E0782 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | | E0782 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH | E0783 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ | E0783 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH | E0783 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | | E0783 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | | E0783 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH | E0783 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ | E0783 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ | E0783 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ | E0783 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | | E0783 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | | E0783 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH | E0783 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH | E0784 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH | E0784 | UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ | E0784 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH | E0784 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | | E0784 | NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | | E0784 | | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | | E0784 | RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9503 | E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9503 | E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SJ S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | SH S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9503 | S5498 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Print Date: 08/11/2008

BlueCross BlueShield of Tennessee-Coding Bundling Rules

Source: PNC-CARR

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9503 | S5501 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9503 | S5502 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9503 | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9503 | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9503 | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9503 | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9503 | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9503 | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9503 | S9500 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9503 | S9501 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9503 | S9502 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9503 | S9503 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9503 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9504 | SH A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ A4206 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | A4207 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH A4208 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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|---------------------------|-----------------------|---------------|---|
| S9504 | SH A4209 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | A4210 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH A4211 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | A4212 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ A4213 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH A4215 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | A4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ A4221 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| Comprehensive Code | SH | Component Code | Source | Rationale |
|---------------------------|-----------|-----------------------|---------------|--|
| S9504 | SH | A4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ | A4230 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH | A4231 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH | A4232 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | | A4244 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH | A4245 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ | A4246 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ | A4247 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |

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|--------------------|----------------|--------|--|
| S9504 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, home infusion procedures include all necessary solutions, equipment, and supplies (except drugs) required to deliver a therapy in a single 24-hour period. |
| S9504 | A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH A6216 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH A6219 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | A6257 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH A6402 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | B4220 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ B4222 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH B4224 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9504 | B9004 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | B9004 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ B9004 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | B9004 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ B9006 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH B9006 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | B9006 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH B9006 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| S9504 | SJ E0776 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | E0776 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | E0776 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH E0776 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | E0779 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ E0779 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ E0779 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | E0779 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| S9504 SH | E0780 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 SH | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 SJ | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 SH | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 SJ | E0780 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | E0780 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 SJ | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 SH | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | E0780 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 SH | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 SJ | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 SH | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | E0781 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 SH | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 SJ | E0781 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 SJ | E0781 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 SH | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 SJ | E0781 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 SH | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| S9504 | E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ E0782 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ E0782 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH E0782 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ E0782 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | E0783 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ E0783 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ E0783 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH E0783 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |

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| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---|------------------|
| S9504 SH E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SJ E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SJ E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 E0784 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SJ E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SH E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 E0784 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SH E0784 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 E0784 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SJ E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SH E0785 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SJ E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SH E0785 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SJ E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SH E0785 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SH E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SJ E0785 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SJ E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---|------------------|
| S9504 SH E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 E0786 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SJ E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SH E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 E0786 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SH E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SJ E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SJ E0786 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SH E0786 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SH E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SJ E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SH E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SJ E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SH E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SJ E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 E0791 NU | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 E0791 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SH E0791 UE | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SJ E0791 RR | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |
| S9504 SH S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy | |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale | |
|---------------------------|-----------------------|---------------|------------------|--|
| S9504 | SJ | S1015 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SJ | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | SH | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | | S1016 | BCBST | Description of comprehensive code includes the component code; BCBST Billing Guidelines for Home Health and Home Infusion Therapy |
| S9504 | | S5498 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9504 | | S5501 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9504 | | S5502 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9504 | | S9208 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9504 | | S9209 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9504 | | S9211 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9504 | | S9212 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9504 | | S9213 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9504 | | S9214 | BCBST | This edited code should not be used with any home infusion per diem code, as per the descriptor for the edited code. |
| S9504 | | S9500 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9504 | | S9501 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9504 | | S9502 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9504 | | S9503 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9504 | | S9504 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9504 | | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9529 | | S9529 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9537 | | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9537 | | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9537 | | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|---|
| S9537 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9537 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9537 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9537 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9537 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9537 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9537 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9537 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9537 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9537 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9537 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9537 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9537 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9537 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9537 | S9537 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9537 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9538 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except blood products and drugs). |
| S9538 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except blood products and drugs). |

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Commercial and Medicaid Code Bundling Rules

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|---------------------------|-----------------------|---------------|---|
| S9538 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except blood products and drugs). |
| S9538 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except blood products and drugs). |
| S9538 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except blood products and drugs). |
| S9538 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except blood products and drugs). |
| S9538 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except blood products and drugs). |
| S9538 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except blood products and drugs). |
| S9538 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except blood products and drugs). |
| S9538 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except blood products and drugs). |
| S9538 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except blood products and drugs). |
| S9538 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except blood products and drugs). |
| S9538 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except blood products and drugs). |
| S9538 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except blood products and drugs). |
| S9538 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except blood products and drugs). |
| S9538 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except blood products and drugs). |
| S9538 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except blood products and drugs). |
| S9538 | S9538 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9538 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9542 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9542 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9542 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9542 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9542 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9542 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9542 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9542 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9542 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9542 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9542 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9542 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9542 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9542 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9542 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9542 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9542 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9542 | S9542 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9542 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9546 | S9546 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9558 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9558 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9558 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9558 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9558 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9558 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9558 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9558 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9558 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9558 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9558 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9558 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9558 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9558 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9558 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9558 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9558 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9558 | S9558 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9558 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9559 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9559 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9559 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9559 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9559 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9559 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9559 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9559 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9559 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9559 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9559 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9559 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9559 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9559 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9559 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9559 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9559 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9559 | S9559 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9559 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9560 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9560 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9560 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9560 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9560 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9560 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9560 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9560 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9560 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9560 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9560 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9560 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9560 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9560 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| S9560 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9560 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9560 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9560 | S9560 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9560 | S9810 | BCBST | This edited code should not be used with any per diem code, as per the descriptor for the edited code. |
| S9562 | A4206 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9562 | A4207 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9562 | A4208 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9562 | A4209 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9562 | A4210 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9562 | A4212 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9562 | A4213 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9562 | A4215 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9562 | A4221 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9562 | A4244 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9562 | A4245 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9562 | A4246 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9562 | A4247 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |

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|---------------------------|-----------------------|---------------|--|
| S9562 | A4250 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9562 | A4455 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9562 | S1015 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9562 | S1016 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9562 | S9562 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9562 | S9810 | BCBST | Edited code not allowed if used to report services included in the listed procedure. |
| S9590 | A4320 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9590 | A4322 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9590 | A4355 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9590 | A4397 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9590 | A4398 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9590 | A4399 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9590 | A4400 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9590 | Q2004 | BCBST | The edited code is a component of the listed code when reported as part of the listed service. As per HCPCS descriptor, the listed service includes all necessary supplies and equipment (except drugs). |
| S9590 | S9590 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9590 | S9810 | BCBST | Edited code not allowed if used to report services included in the listed procedure. |
| S9802 | S9802 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9970 | S9970 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9975 | S9975 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9981 | S9981 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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|---------------------------|-----------------------|---------------|--|
| S9986 | S9986 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9989 | S9989 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9990 | S9990 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9991 | S9991 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9992 | S9992 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9994 | S9994 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| S9996 | S9996 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| T1000 | T1000 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| T1001 | T1001 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| T1002 | T1002 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| T1003 | T1003 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| T1004 | T1004 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| T1005 | T1005 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| T1006 | T1006 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| T1007 | T1007 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| T1009 | T1009 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| T1010 | T1010 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| T1012 | T1012 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| T1013 | T1013 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| T1015 | 99201 | BCBST | Edited code not allowed if used to report evaluation and management services included in the listed service. |
| T1015 | 99202 | BCBST | Edited code not allowed if used to report evaluation and management services included in the listed service. |
| T1015 | 99203 | BCBST | Edited code not allowed if used to report evaluation and management services included in the listed service. |
| T1015 | 99204 | BCBST | Edited code not allowed if used to report evaluation and management services included in the listed service. |
| T1015 | 99205 | BCBST | Edited code not allowed if used to report evaluation and management services included in the listed service. |

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|---------------------------|-----------------------|---------------|--|
| T1015 | 99211 | BCBST | Edited code not allowed if used to report evaluation and management services included in the listed service. |
| T1015 | 99212 | BCBST | Edited code not allowed if used to report evaluation and management services included in the listed service. |
| T1015 | 99213 | BCBST | Edited code not allowed if used to report evaluation and management services included in the listed service. |
| T1015 | 99214 | BCBST | Edited code not allowed if used to report evaluation and management services included in the listed service. |
| T1015 | 99215 | BCBST | Edited code not allowed if used to report evaluation and management services included in the listed service. |
| T1015 | T1000 | BCBST | Edited code not allowed if used to report nursing services included in the listed service. |
| T1015 | T1001 | BCBST | Edited code not allowed if used to report nursing services included in the listed service. |
| T1015 | T1002 | BCBST | Edited code not allowed if used to report nursing services included in the listed service. |
| T1015 | T1003 | BCBST | Edited code not allowed if used to report nursing services included in the listed service. |
| T1015 | T1004 | BCBST | Edited code not allowed if used to report nursing services included in the listed service. |
| T1015 | T1015 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| T1017 | T1016 | BCBST | This service, supply, or equipment is considered a component of the listed code or represents an alternative service, supply or equipment which is generally redundant to the listed code. |
| T1018 | T1018 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| T1020 | T1019 | BCBST | This service, supply, or equipment is considered a component of the listed code or represents an alternative service, supply or equipment which is generally redundant to the listed code. |
| T1022 | T1022 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| T1023 | T1023 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| T1024 | T1024 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| T1025 | T1025 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| T1025 | T1026 | BCBST | This service, supply, or equipment is considered a component of the listed code or represents an alternative service, supply or equipment which is generally redundant to the listed code. |
| T1028 | T1028 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| T1029 | T1029 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| T1030 | T1030 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| T1031 | T1031 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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BlueCross BlueShield of Tennessee

Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| T2002 | T2002 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5008 | V5008 | BCBST | Code redundant to self/should not be reported more than once due to standard description |
| V5010 | V5010 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5011 | V5011 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5014 | V5014 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5020 | V5020 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5030 | V5030 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5040 | V5040 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5050 | V5050 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5060 | V5060 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5070 | V5070 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5080 | V5080 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5090 | V5090 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5095 | V5095 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5100 | V5030 | BCBST | The edited code is considered redundant to or an integral component of the listed code. |
| V5100 | V5040 | BCBST | The edited code is considered redundant to or an integral component of the listed code. |
| V5100 | V5100 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5110 | V5110 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5120 | V5120 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5130 | V5130 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5140 | V5140 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5150 | V5150 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5160 | V5160 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5170 | V5170 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5180 | V5170 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |

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Source: PNC-CARR

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| V5180 | V5180 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5190 | V5170 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5190 | V5180 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5190 | V5190 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5200 | V5200 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5210 | V5210 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5220 | V5210 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5220 | V5220 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5230 | V5210 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5230 | V5220 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5230 | V5230 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5240 | V5240 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5241 | V5241 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5242 | V5242 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5243 | V5242 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5243 | V5243 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5244 | V5244 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5245 | V5244 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5245 | V5245 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5246 | V5244 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5246 | V5245 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5246 | V5246 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5247 | V5244 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5247 | V5245 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5247 | V5246 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5247 | V5247 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5248 | V5248 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5249 | V5248 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5249 | V5249 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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Commercial and Medicaid Code Bundling Rules

| Comprehensive Code | Component Code | Source | Rationale |
|---------------------------|-----------------------|---------------|--|
| V5250 | V5250 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5251 | V5250 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5251 | V5251 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5252 | V5252 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5253 | V5252 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5253 | V5253 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5254 | V5254 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5255 | V5254 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5255 | V5255 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5256 | V5254 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5256 | V5255 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5256 | V5256 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5257 | V5254 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5257 | V5255 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5257 | V5256 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5257 | V5257 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5258 | V5258 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5259 | V5258 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5259 | V5259 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5260 | V5258 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5260 | V5259 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5260 | V5260 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5261 | V5258 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5261 | V5259 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5261 | V5260 | BCBST | The listed and edited hearing aid codes are mutually exclusive. |
| V5261 | V5261 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5264 | V5264 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5268 | V5268 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5269 | V5269 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5270 | V5270 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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|---------------------------|-----------------------|---------------|--|
| V5271 | V5271 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5272 | V5272 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5273 | V5273 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5274 | V5274 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5298 | V5298 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5299 | V5299 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5336 | V5336 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5362 | V5362 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5363 | V5363 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |
| V5364 | V5364 | BCBST | This service, supply, or equipment is appropriately provided only once for a patient, or is typically only provided more than once in unusual circumstances. |

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