

Codes by procedure types requiring medical records submissions.

The following is a list of the CPT and HCPCS codes known to typically require additional information to document medical necessity for Blue Medicare patients. When reporting one of the following codes on a Blue Medicare member's claim, only the medical records identified as "Information Required" should be submitted to Blue Cross NC in advance of the claim being filed.

Please note this code listing is not to be considered all-inclusive and is subject to revision by Blue Cross NC at any time.

| Codes | | Brief Description | Information Required |
|---------------------|---------|--|---|
| HCPCS and CPT codes | Various | Unlisted Surgical Procedure | Operative Report and Consult Notes |
| HCPCS and CPT codes | Various | Unlisted Drugs | NDC Number, drug name and dosage |
| CPT Codes | 76514 | Ophthalmic ultrasound, diagnostic; corneal Pachymetry, unilateral or bilateral (determination of corneal thickness) | Physician/nursing/office notes |
| CPT Codes | 99354 | Prolonged evaluation and management or psychotherapy service(s) (beyond the typical service time of the primary procedure) in the office or other outpatient setting requiring direct patient contact beyond the usual service; first hour (List separately in addition to code for office or other outpatient Evaluation and Management or psychotherapy service) | Physician/nursing/office notes, medication record, operative report, invoice and history & physical. |
| CPT Codes | 92025 | Computerized corneal topography, unilateral or bilateral, with interpretation and report | Physician/nursing/office notes |
| CPT Codes | 96156 | Health behavior assessment or re-assessment. | Physician/nursing/office notes |
| CPT Codes | 96158 | Health behavior intervention, individual, face-to-face; initial 30 minutes | Physician/nursing/office notes |
| CPT Codes | 96159 | Health behavior intervention, individual, face-to-face; each additional 15 minutes | Physician/nursing/office notes |
| HCPCS and CPT Codes | A4648 | Tissue marker, implantable, any type, each | The invoice and Physician/nursing/office notes |
| HCPCS and CPT Codes | V2744 | Tint, photochromatic, per lens | The Physician/nursing/office notes, and Eyeglass prescription |
| HCPCS and CPT Codes | V2750 | Antireflective coating, per lens | The Physician/nursing/office notes, and Eyeglass prescription |
| HCPCS and CPT | V2785 | Processing, preserving, and transporting corneal tissue. | Service Supplier Invoice |



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| Codes | | | |
| HCPCS and CPT Codes | G0127 | Trimming of dystrophic nails, any number | Physician/nursing/office notes. |
| HCPCS and CPT Codes | A2001 to A2021 A4100 Q4100 to Q4108 Q4110 to Q4118 Q4121 to Q4128 Q4130 Q4132 to Q4171 Q4173 to Q4206 Q4208 to Q4222 Q4224 to Q4242 Q4244 to Q4250 Q4253 to Q4284 Q4287 to Q4304 C5271 to C5278 C9352 to C9356 C9358 C9360 to C9364 | Specific Skin Graft codes | H&P and Office notes or Op Report and the implant log or brand name of product used for each date of service. |