AmeriHealth Caritas Pennsylvania Bill Above Listing		
CODE	DESCRIPTION	
CODL	IMMUNIZATIONS	
83655	Lead	
90632	Hepatitis A (Harvix) (Vaqta) Adult Age 19 years and older	
90633	Hepatitis A Ages 1-18 (Harvix)	
90634	Hepatitis A Ages 1-18 (Vaqta)	
90636	Hep A/B (Twinrix) Age 18 years and older	
90645	HIB 4th Dose - Intramuscular	
90647	HIB (PedvaxHIB) PRP-OMP	
90648	Hemophilus HIB (ActHBI) PRP-T	
90649	HPV (Gardasil)	
90650	HPV (Cervarix)	
90654	Influenza virus vaccine, split virus, preservative-free, for intradermal use	
90655	Influenza (Inactivated) Age 6 months and older	
90656	Influenza Virus vaccine - Preservative Free 3 Yrs and older	
90657	Influenza(Inactivated p- free, pr filled) Ages 6-35 months	
90658	Influenza, Split Virus, 3 years & >	
90660	Influenza (Flu Mist) (intranasal) Age 2-49 years healthy	
90662	Influenza virus vaccine, split virus, preservative free, enhanced	
	immunogenicity via increased antigen content, for intramuscular use	
90663	Influenza virus vaccine, pandemic formulation	
90669	PNU 7 - Pneumococcal Vaccine (Prevnar), Pediatric	
90670	PNU 13 - Pneumococcal Vaccine (Prevnar), Pediatric, Adult 50 years and older	
90680	RotaTeq - Rotovirus vaccine	
90681	Rotarix (GSK)	
90696	DTaP - IPV - GSK (Kinrix)	
90698	DTaP -HIB - IPV (Pentacel)	
90700	DTaP (Daptacel), (Infanrix) (Tripedia)	
90702	DT	
90707	MMR	
90710	MMRV	
90713	IPV	
90714	Decavac (Td) Preservative Free - 7 years or older	
90715	Tdap (Adacel) ages 11-64 (Boostrix) ages 10-18	
90716	Varicella (Varivax)	
90723	Dtap-IPV-Hep B- GSK (Pediarix)	
90732	PPV 23 Adult Pneumococcal Ages 2 and over	
90734	MCV4 (Menactra) Age 11-55 years	
90736	Zoster (shingles) vaccine, live, for subcutaneous injection	
90743	Hepatitis B Vaccine adolescent	
90744	Hep B - Child (Recombivax) (Engerix) - GSK	

AmeriHealth Caritas Pennsylvania		
Bill Above Listing		
90746 Hep B - Adult GSK - (Engerix B)		
90748 Hep B-Hib (Comvax)		
*VFC - Vaccines for Children. Federally funded program that supplies free vaccines to		
physicians who enroll in the program. AMHP reimburses a \$10.00 administration fee		
when free vaccines are provided. ** AMHP will reimburse fee indicated for adult		
administration of vaccines.		
INPATIENT CARE - MAXIMUM PER ADMISSION - \$300.00 OR HIGHEST		
COMPENSATORY RATE BELOW		
99221 Initial Day - Low Severity		
99222 Initial Day - Moderate Severity		
99223 Initial Day - High Severity		
99231 Subsequent Day		
99232 Subsequent Day		
99233 Subsequent Day		
99238 Discharge Day Management		
99360 Attendance at High Risk Delivery ea. 30 min.		
99460 Inpatient Newborn Care		
99463 Initial Hospital or Birthing Center Care, per Day, for Eval and Management		
of Normal Newbon Infant Admitted and Discharged on the Same Date.		
54150 Circumcision, Newborn		
59409 Vaginal Delivery only		
59410 Vaginal Delivery with postpartum visit		
99462 Subsequent Day - Newborn		
99464 Resuscitation - Newborn		
HOME AND NURSING HOME CARE		
99341 Home Visit, New Patient, 20 minutes		
99342 Home Visit, New Patient, 30 minutes		
99343 Home Visit, New Patient, 45 minutes		
99344 Home Visit, New Patient, 60 minutes		
99345 Home Visit, New Patient, 75 minutes		
99347 Home Visit, Established Patient, 15 minutes		
99348 Home Visit, Established Patient, 25 minutes		
99349 Home Visit, Established Patient, 40 minutes		
99350 Home Visit, Established Patient, 60 minutes		
99304 Initial Nursing Home Care		
99305 Initial Nursing Home Care		
99306 Initial Nursing Home Care		
99307 Subsequent Nursing Home Care		
99308 Subsequent Nursing Home Care		
99309 Subsequent Nursing Home Care		
99310 Subsequent Nursing Home Care		
SIMPLE REPAIR OF WOUND, OTHER OFFICE PROCEDURES		

AmeriHealth Caritas Pennsylvania		
11720	Bill Above Listing	
11730	Avulsion of Nail Plate	
11732	Each additional Nail Plate	
11740	Evacuation of Subungual Hematoma	
12001	Sutures 2.5 CM or LESS	
12002	Sutures 2.6 CM to 7.5 CM	
12004	Sutures 7.6 CM to 12.5 CM	
12005	Sutures 12.6 CM to 20.0 CM	
12006	Sutures 20.1 CM to 30.0 CM	
12007	Sutures Over 30 CM	
12020	Treatment of Superficial Wound Dehiscence; Simple	
45300	Proctosigmoidoscopy	
45330	Flexible Sigmoidoscopy	
57452	Colposcopy (Vaginoscopy)	
86580	Tuberculosis, intradermal	
87880	Streptococcus, group A (Quick Strep)	
94664	Demonstration Aerosol / nebulizer	
94640	Inhalation Treatment	
99050	Services outside of regular office hours/days	
99051	Services at regular scheduled evening/weekend/holiday	
992**	Postpartum Visit	
993XXEP	Completed EPSDT Indicator on age Appropriate E&M	
D1206	Topic Fluoride Treatment children under five	
T1001U9	Initial Intake Pregnancy	
CHILDHO	DD NUTRITION AND WEIGHT MANAGEMENT SERVICES	
96150-U3	Health & Behavior Assessment face-to-face ea. 15 min.	
96150-U3	Health & Behavior Assessment face-to-face ea. 15 min.	
96151	Health & Behavior Re-Assessment face-to-face ea. 15 min.	
96152-U3	Health & Behavior Interview - Intervention - face-to-face 15 min	
96153	Health & Behavior Intervention - face-to-face group each 15 min	
96154	Health & Behavior Intervention - face-to-face family each 15 min	
97802	Medical nutrition therapy; initial assessment and intervention, individual,	
	face-to-face with the patient, each 15 minute	
97803	Medical nutrition therapy; re-assessment and intervention, individual, face-	
	to-face with the patient, each 15 minutes	
97804	Medical nutrition therapy; group (2 or more individual(s)), each 30 minutes	
S9470	Nutritional Counseling, dietician visit	
REPORTIN	G OF TEST RESULTS/COLLECTION	
NOTE: The date to be billed for CPT Class II Codes is the date that the service was		
performed (not the date that the results were reviewed with the member).		
G0124	Screening cytopathology, cervical or vaginal, collection	
G0141	Screening cytopathology smears, cervical or vag collection	

AmeriHealth Caritas Pennsylvania		
Bill Above Listing		
P3001	Screening pap smear, cervical or vaginal, collection	
3021F	Left ventricular ejection fraction (LVEF) <40% or documentation of	
	moderately or severely depressed left ventricular	
3022F	Left ventricular ejection fraction (LVEF) >=40% or documentation as	
	normal or mildly depressed left ventricular systo	
3044F	HbA1C less than 7.0	
3045F	HbA1C 7.0 - 9.0	
3046F	HbA1C greater than 9.0	
3048F	LDL-C less than 100 mg/dl	
3049F	LDL-C 100-129 mg/dl	
3050F	LDL-C greater than or equal to 130 mg/dl	
3074F	Systolic B/P less than 130 mm Hg	
3075F	Systolic B/P 130 to 139 mm Hg	
3077F	Systolic B/P greater than or equal to 140 mm Hb	
3078F	Diastolic B/P less than 80 mm Hg	
3079F	Diastolic B/P 80-89 mm Hg	
3080F	Diastolic B/P greater than or equal to 90 mm Hg	
OTHER		
86703	HIV	
\$9075	Smoking Cessation Treatment	
G0437	Smoking Cessation Treatment	
99406	Smoking cessation counseling 3-10 min	
99407	Smoking cessation counseling >10 min	