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Oncology/Hematology

- To verify coverage, contracted providers can use the [Eligibility Inquiry tool](#) .
- To see prior authorization requirements or medical necessity review criteria, see the [Pre authorization Code Check](#) tool.
- Non-contracted providers can contact the Provider Assistance Unit at 1-888-767-4670.

Important information

- Procedure authorizations do not include the standard E&M code range
- All codes that are underlined under each reason name include the same range as code in parentheses.
- For procedures that include additional codes beyond the ones listed below the individual reason name, we've added a link to the Procedure Standard Code Range. If the link is not present, the additional codes are not included.

Oncology/Hematology Consultations

[Evaluate & Treat – 3 visits or 6 visits \(99214\) Consult Only \(99202\), Second Opinion \(99203\)](#)

Procedure (Referral Reason) Service Ranges:

Blood Transfusion: (36430)

[Procedure Standard Code Range Included](#)

[36430](#), [36440](#), [36450](#), [36455](#), [36456](#), [36460](#), 36556, P9017, P9033

Bone Marrow Biopsy: (38221)

[Procedure Standard Code Range Included](#)

[38220](#), [38221](#), [38222](#)

Breast Biopsy and Lesion Removal: (19081)

[Procedure Standard Code Range Included](#)

10005, 10006, 10007, 10008, 10035, 10036, [19081](#), [19082](#), [19083](#), [19084](#), [19085](#), [19086](#), 76942

Central Venous Access Device, Catheter or PICC: (36566)

[Procedure Standard Code Range Included](#)

32550, 32551, 32556, 32557, 36000, 36005, 36010, 36011, 36012, 36013, 36014, 36015, 36140, 36215, 36216, 36217, 36218, 36245, 36246, 36247, 36248, 36251, 36252, 36253, 36254, [36555](#), [36556](#), [36557](#), [36558](#), [36560](#), [36561](#), [36563](#), [36565](#), [36566](#), [36568](#), [36569](#), [36570](#), [36571](#), [36572](#), [36573](#), [36575](#), [36576](#), 36640, 36660, 36901, 36902, 36903, 36904, 36905, 36906, 36907, 36908, 36909, A4301, C1788



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Lutathera Radiopharmaceuticals:- (A9513)

A9513, 96360, 96360, 96361, 96365, 96366, 96367, 96368, 96369, 96370, 96371, 96372, 96373, 96374, 96375, 96376, 96401, 96402, 96405, 96406, 96409, 96411, 96413, 96415, 96416, 96417, 96420, 96422, 96423, 96425, 96440, 96446, 96450, 96521, 96522, 96523, 96542, J0171, J1200, J2920, J2930, J7040, J7050, J8540

Lymph Node Biopsy, Treatment or Removal: (38500)

Procedure Standard Code Range Included

10035, 10036, 12031, 12032, 12034, 12035, 12036, 12037, 12041, 12042, 12044, 12045, 12046, 12047, 12051, 12052, 12053, 12054, 12055, 12056, 12057, 13100, 13101, 13102, 13120, 13121, 13122, 13131, 13132, 13133, 14000, 14001, 14020, 14021, 14040, 14041, 14060, 14061, 35221, 35246, 35301, 36560, 36563, 38500, 38505, 38510, 38520, 38525, 38530, 38531, 38542, 38550, 38555, 38562, 38564, 38700, 38720, 38724, 38740, 38745, 38746, 38747, 38760, 38765, 38770, 38780, 38790, 38792, 38794, 38900

Mastectomy – Radical Complex: (19306)

Procedure Standard Code Range Included

10140, 13100, 13101, 13102, 14000, 14001, 14020, 14021, 14040, 14301, 14302, 15200, 15201, 15271, 15272, 15273, 15274, 15734, 15777, 19120, 19125, 19126, 19285, 19305, 19306, 35206, 36563, 38500, 38505, 38740, 38745, 38790, 38792, 38900, 64461, 64462, 64463, C9728, Q9968

Mastectomy – Radica Non -Complex: (19307)

Procedure Standard Code Range Included

10140, 13100, 13101, 13102, 14000, 14001, 14020, 14021, 14040, 14301, 14302, 15200, 15201, 15271, 15272, 15273, 15274, 15734, 15777, 19120, 19125, 19126, 19285, 19307, 35206, 36563, 38500, 38505, 38740, 38745, 38790, 38792, 38900, 64461, 64462, 64463, C9728, Q9968, Q9968

Mastectomy Simple/Partial: (19303)

Procedure Standard Code Range Included

10140, 13100, 13101, 13102, 14000, 14001, 14020, 14021, 14040, 14301, 14302, 15200, 15201, 15271, 15272, 15273, 15274, 15734, 15777, 19120, 19125, 19126, 19285, 19301, 19302, 19303, 35206, 36563, 38500, 38505, 38740, 38745, 38790, 38792, 38900, 64461, 64462, 64463, C9728, Q9968

Pluvicto Radiopharmaceuticals:- (A9607)

A9607, 96360, 96360, 96361, 96365, 96366, 96367, 96368, 96369, 96370, 96371, 96372, 96373, 96374, 96375, 96376, 96401, 96402, 96405, 96406, 96409, 96411, 96413, 96415, 96416, 96417, 96420, 96422, 96423, 96425, 96440, 96446, 96450, 96521, 96522, 96523, 96542, J0171, J1200, J2920, J2930, J7040, J7050, J8540

Radiation Therapy: (77412)

Procedure Standard Code Range Included

77262, 77263, 77280, 77285, 77290, 77293, 77295, 77300, 77306, 77307, 77321, 77331, 77332, 77333, 77334, 77336, 77370, 77401, 77402, 77407, 77412, 77417, 77427, 77431, 77470, 98966, 98967, 98968, 98970, 98971, 98972, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99242, 99243, 99244, 99245, 99401, 99402, 99403, 99404, 99406, 99407, 99408, 99409, 99411, 99412, 99415, 99416, 99417, 99421, 99422, 99423, 99424, 99425, 99426, 99427, 99437, 99439, 99441, 99442, 99443, 99446,



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99447, 99448, 99449, 99450, 99451, 99452, 99495, 99496, G0508, G0509, G2010, G2011, G2012, G2061, G2062, G2063, G2211, G2212, G2250, G2251, G2252, G6001, G6002, G6003, G6004, G6005, G6007, G6008, G6009, G6010, G6011, G6012, G6013, G6014, Q3014

Skin Lesion Removal - Malignant: (17260)

Procedure Standard Code Range Included

10060, 10061, 11102, 11103, 11104, 11105, 11106, 11107, 11200, 11201, 11300, 11301, 11302, 11303, 11305, 11306, 11307, 11310, 11311, 11312, 11313, 11400, 11401, 11402, 11403, 11404, 11406, 11420, 11421, 11422, 11423, 11424, 11426, 11440, 11441, 11442, 11443, 11444, 11446, 11600, 11601, 11602, 11603, 11604, 11606, 11620, 11621, 11622, 11623, 11624, 11626, 11640, 11641, 11642, 11643, 11644, 11646, 11900, 11901, 12031, 12032, 12034, 12035, 12036, 12037, 12041, 12042, 12044, 12045, 12046, 12047, 12051, 12052, 12053, 12054, 12055, 12056, 12057, 13100, 13101, 13102, 13120, 13121, 13122, 13131, 13132, 13133, 13151, 13152, 13153, 13160, 15200, 15201, 15200, 15221, 15240, 15241, 15260, 15261, 15570, 15572, 15574, 15576, 15600, 15610, 15620, 15630, 15650, 15730, 15731, 17000, 17003, 17004, 17110, 17260, 17261, 17262, 17263, 17264, 17266, 17270, 17271, 17272, 17273, 17274, 17276, 17280, 17281, 17282, 17283, 17284, 17286, 40490, 67840, 69100

Stem Cell Collection and Preparation: (38207)

Procedure Standard Code Range Included

38204, 38205, 38206, 38207, 38208, 38209, 38210, 38211, 38212, 38213, 38214, 38215

Date	Description
03/16/2020	Created
06/23/2022	Renamed Mastectomy to Mastectomy Simple/Partial and removed codes 19304, 19305, 19306, 19307 and added 13100, 13101, 13102, 14000, 14001, 14020, 14021, 14040, 14301, 14302, 15200, 15201, 15271, 15272, 15273, 15274, 15734, 19120, 19125, 19126, 19285, 35206, 36561, 36563, 38500, 38505, 38525, 38740, 38745, 38790, 38792, 38900, C9728, Q9968. Added Reason Mastectomy – Radical
06/28/2022	Added 0591T, 0592T, 0593T, 96112, 96164, 96165, 96167, 96168, 96170, 96171, A9590, G2058, G2064 to Eval & Treat. Removed L0220, L0622, L0624, L1685, L1755, L1832, L1860, L1904, L1907, L1920, L1950, L1970, L2108, L2128, L3674, L3702, L3740, L3806, L3808, L3906, L3915, L3923, L3961, L3971, L3975, L3978 from Eval & Treat. Removed L0220, L0622, L0624, L1685, L1755, L1832, L1860, L1904, L1907, L1920, L1950, L1970, L2108, L2128, L3674, L3702, L3740, L3806, L3808, L3906, L3915, L3923, L3961, L3971, L3975, L3978 from Standard Code Range for Procedures.
07/15/2022	Added 76942 to Breast Biopsy and Lesion Removal
08/01/2022	Added 98966, 98967, 98968, 98970, 98971, 98972 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215 99417, 99421, 99422, 99423, 99439, 99441, 99442, 99443, 99446, 99447, 99448, 99449, 99450, 99451, 99452, 99495, 99496, G0508, G0509, G2010, G2011, G2012, G2061,



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	G2062, G2063, G2211, G2212, G2250, G2251, G2252, Q3014 to Radiation Therapy Other. Added 77262, 77263, 77280, 77285, 77290, 77293, 77295, 77300, 77306, 77307, 77321, 77331, 77332, 77333, 77334, 77336, 77370, 77401, 77402, 77407, 77412, 77417, 77427, 77431, 77470 to Eval & Treat Section.
08/02/2022	Removed 77401, 77402, 77407, 77412, 77417, 77427, 77431, 77470 from Eval & Treat section. Added 12031, 12032, 12034, 12035, 12036, 12037, 12041, 12042, 12044, 12045, 12046, 12047, 12051, 12052, 12053, 12054, 12055, 12056, 12057, 13100, 13101, 13102, 13120, 13121, 13122, 13131, 13132, 13133, 14000, 14001, 14020, 14021, 14040, 14041, 14060, 14061, 14301, 14302 to Lymph Node Biopsy, Treatment or Removal.
08/16/2022	Added 90736, 90750, 90759, C9088, C9089, C9092 to Evaluate & Treat – 3 visits or 6 visits and Standard Code Range for Procedures section. Added 99424, 99425, 99426, 99427, 99437 to Consult Only, Second Opinion, Evaluate & Treat – 3 visits or 6 visits and Radiation Therapy.
08/31/2022	Added 99401, 99402, 99403, 99404, 99406, 99407, 99408, 99409, 99411, 99412, 99415, 99416 to Radiation Therapy Other
10/12/2022	Added 76998 to Standard Code Range for Procedures section.
12/01/2022	Removed J7336 from Evaluate & Treat – 3 visits or 6 visits and Standard Code Range for Procedures as code now has Review requirement.
01/31/2023	Removed 99201 from Consult Only and Second Opinion. Removed Q5107, J2791, J2792, C9257 and G2064 from Evaluate & Treat – 3 visits or 6 visits and Standard Code Range for Procedures. Added C9101, C9144, J0134, J0136, J0173, J0283, J0611, J0689, J0701, J0703, J0877, J0891, J0892, J0893, J0898, J0899, J1456, J1574, J1611, J1643, J1954, J2021, J2184, J2247, J2251, J2272, J2281, J2311, J2401, J2402, J3244, J3371, J3372, J9314, J9393, J9394 to Evaluate & Treat – 3 visits or 6 visits and Standard Code Range for Procedures.
02/01/2023	Added G6014 to Radiation Therapy.
02/22/2023	Added 64462 to Mastectomy – Radical and Mastectomy Simple/Partial.
03/10/2023	Added 64461 and 64463 to Mastectomy – Radical Mastectomy Simple/Partial.
03/16/2023	Removed 99239 and 99255 from Evaluate & Treat – 3 visits or 6 visits. Added 99418 and G0318 to Evaluate & Treat – 3 visits or 6 visits.
03/28/2023	Added 15777 to Mastectomy – Radical and Mastectomy Simple/Partial.
04/17/2023	Added 15853 15854 99484 99492 99493 99494 to Evaluate & Treat – 3 visits or 6 visits. Added J7169 to Evaluate & Treat – 3 visits or 6 visits and Standard Code Range for Procedures.
05/11/2023	Added 86328, 86408, 86409, 86413, 86769, 87426, 87428, 87635, 87636, 87637, 87811, 87913, 91300, 91301, 91302, 91303, 91304, 91305, 91306, 91307, 91308, 91309, 91310, 91311, 91312, 91313, 91314, 91315, 91316, 91317, 0001A, 0002A, 0003A, 0004A, 0011A, 0012A, 0013A, 0021A, 0022A, 0031A, 0034A, 0041A, 0042A, 0044A, 0051A, 0052A, 0053A, 0054A, 0064A, 0071A, 0072A, 0073A, 0074A, 0081A, 0082A, 0083A,



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	0091A, 0092A, 0093A, 0094A, 0104A, 0111A, 0112A, 0113A, 0124A, 0134A, 0144A, 0154A, 0164A, 0173A, 0174A, 0202U, 0223U, 0224U, 0225U, 0226U, 0240U, 0241U, C1943, C9803, D0604, D0605, D0606, D1701, D1702, D1703, D1704, D1705, D1706, D1707, D1708, D1709, D1710, D1711, D1712, D1713, D1714, G2023, G2024, J0612, J0613, J2403, J9196, J9294, J9296, J9297, M0201, M0249, M0250, Q0249, U0001, U0002, U0003, U0004, U0005 to Evaluate & Treat – 3 visits or 6 visits and Standard Code Range for Procedures. Removed J2400 and J9044 from Evaluate & Treat – 3 visits or 6 visits and Standard Code Range for Procedures.
05/22/2023	Removed J9041 from Evaluate & Treat – 3 visits or 6 visits and Standard Code Range for Procedures.
05/30/2023	Added Lutathera Radiopharmaceuticals and Pluvicto Radiopharmaceuticals orders. Removed 91300, 91301, 91305, 91306, 91307, 91308, 91309, 91311, 0001A, 0002A, 0003A, 0004A, 0011A, 0012A, 0013A, 0051A, 0052A, 0053A, 0054A, 0064A, 0071A, 0072A, 0073A, 0074A, 0081A, 0082A, 0083A, 0091A, 0092A, 0093A, 0094A, 0111A, 0112A, 0113A from Evaluate & Treat – 3 visits or 6 visits and Standard Code Range for Procedures section. Added 0121A, 0141A, 0142A, 0151A, 0171A, 0172A Evaluate & Treat – 3 visits or 6 visits and Standard Code Range for Procedures section.
05/31/2023	Removed J9318 and J9319 from Evaluate & Treat – 3 visits or 6 visits and Standard Code Range for Procedures section due to codes now have criteria effective 06/01/23.
06/09/2023	Removed reasons Consult Only, Second Opinion Eval & treat sections and Standard Code Range for Procedures. Added link for list of codes for Consult Only, Second Opinion Eval & treat and Standard Code Range for Procedures.
12/05/2023	Name change from Mastectomy – Radical to Mastectomy – Radical Complex. Removed codes 19307 and 36561 from Mastectomy – Radical Complex. Added New Reason Mastectomy – Radical Non-Complex.
02/23/2024	Added 15574 to Skin Lesion Removal – Malignant
02/29/2024	Added 10005, 10006, 10007, 10008, 10035, 10036 to Breast Biopsy and Lesion Removal. Removed 36561 from Lymph Node Biopsy, Treatment or Removal as codes is part of Standard Code Range for Procedures included with all Procedure (non-consultation). Removed 36561 from Mastectomy Simple/Partial as codes is part of Standard Code Range for Procedures included with all Procedure (non-consultation). Added 36556, P9017, P9033 to Blood Transfusion. Added 99242, 99243, 99244, 99245 to Radiation Therapy.



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04/29/2024	Added G6001, G6003, G6004, G6005, G6007, G6008, G6009, G6010 to Radiation Therapy – Other.
06/20/2024	Reformatted page and added Procedure Standard Code Range link under each reason that includes the additional codes listed within the link. Added Important information section. Updated Evaluate& Treat- 3 visits or 6 visits (99214) Consult Only (99202), Second Opinion (99203) link.
08/08/2024	For Clarification Under Important information- Removed statement- All Codes listed under each individual reason name and within the procedure Standard Code Range are included. And added new bullet -For procedures that include additional codes beyond the ones listed below the individual reason name, we've added a link to the Procedure Standard Code Range. If the link is not present, the additional codes are not included.

Information on this site is for informational purposes only and does not guarantee coverage or payment. All services must be considered medically necessary and certain services may be subject to additional clinical review criteria. All benefits are subject to the patient's medical coverage agreement including visit, quantity, and/or dollar limits.

The Kaiser Permanente Published Range page was developed to assist in administering plan benefits. For information concerning whether a specific service or benefit is covered, please refer to the patient's medical coverage agreement, the Provider Manual, your Provider contract, or call the Kaiser Permanente Provider Assistance Unit at 1-888-767-4670.

The Kaiser Permanente Published Range page results reflect the range information at the time of the inquiry only. Kaiser Permanente reserves the exclusive right to modify, revoke, suspend or change the Published Ranges, at Kaiser Permanente's sole discretion.

CPT codes deleted by the American Medical Association or HCPC codes deleted by Centers for Medicare & Medicaid Services will remain eligible for payment for valid dates of service for 24 months to allow time for claims submission.