



Northern Light<sup>SM</sup>

Employee Health Plan

Beacon Health

Category	Sub-Category	Type	CPT Code	REV Code	Code Description	Dx Grouping	Age Range	Frequency	Coverage Preferred and In-Network	Coverage Out-of-Network
Cholesterol	Cholesterol	CPT	80061		Lipid Panel	Any Dx	Any	1	100%	50%
Cholesterol	Cholesterol	CPT	82465		Cholesterol, Serum Or Whole Blood, Total	Any Dx	Any	1	100%	50%
Cholesterol	Cholesterol	CPT	83718		Lipoprotein, Direct Measurement; High Density Cholesterol (HDL Cholesterol)	Any Dx	Any	1	100%	50%
Cholesterol	Cholesterol	CPT	83719		Lipoprotein, Direct Measurement; VLDL Cholesterol	Any Dx	Any	1	100%	50%
Cholesterol	Cholesterol	CPT	83721		Lipoprotein, Direct Measurement; LDL Cholesterol	Any Dx	Any	1	100%	50%
Cholesterol	Cholesterol	CPT	84478		Triglycerides	Any Dx	Any	1	100%	50%
Prev Lab Path Codes	Basic Metabolic Panel	CPT	80048		Basic Metabolic Panel	Well Preventive Encounter Dx or Diabetes Dx or Maternity Dx	Any	1	100%	50%
Prev Lab Path Codes	General Health Panel	CPT	80050		General Health Panel	Well Preventive Encounter Dx or Diabetes Dx or Maternity Dx	Any	1	100%	50%
Prev Lab Path Codes	Comprehensive Metabolic Panel	CPT	80053		Comprehensive Metabolic Panel	Well Preventive Encounter Dx or Diabetes Dx or Maternity Dx	Any	1	100%	50%
Prev Lab Path Codes	CBC/Hemoglobin/Hematocrit/Anemia/Iron Deficiency	CPT	85013		Blood Count, Spun Microhematocrit	Well Preventive Encounter Dx or Diabetes Dx or Maternity Dx	Any	1	100%	50%
Prev Lab Path Codes	CBC/Hemoglobin/Hematocrit/Anemia/Iron Deficiency	CPT	85014		Blood Count Hematocrit	Well Preventive Encounter Dx or Diabetes Dx or Maternity Dx	Any	1	100%	50%
Prev Lab Path Codes	CBC/Hemoglobin/Hematocrit/Anemia/Iron Deficiency	CPT	85018		Blood Count Hemoglobin	Well Preventive Encounter Dx or Diabetes Dx or Maternity Dx	Any	1	100%	50%
Prev Lab Path Codes	CBC/Hemoglobin/Hematocrit/Anemia/Iron Deficiency	CPT	85025		Blood Count Complete Auto&Auto Difrntrl Wbc	Well Preventive Encounter Dx or Diabetes Dx or Maternity Dx	Any	1	100%	50%
Prev Lab Path Codes	CBC/Hemoglobin/Hematocrit/Anemia/Iron Deficiency	CPT	85027		Blood Count Complete Automated	Well Preventive Encounter Dx or Diabetes Dx or Maternity Dx	Any	1	100%	50%
Prev Lab Path Codes	CBC/Hemoglobin/Hematocrit/Anemia/Iron Deficiency	CPT	85041		Blood Count Red Blood Cell Automated	Well Preventive Encounter Dx or Diabetes Dx or Maternity Dx	Any	1	100%	50%
Prev Lab Path Codes	CBC/Hemoglobin/Hematocrit/Anemia/Iron Deficiency	HCPC	G0306		Cbc/Diff Wbc W/O Platelet	Well Preventive Encounter Dx or Diabetes Dx or Maternity Dx	Any	1	100%	50%
Prev Lab Path Codes	CBC/Hemoglobin/Hematocrit/Anemia/Iron Deficiency	HCPC	G0307		Cbc Without Platelet	Well Preventive Encounter Dx or Diabetes Dx or Maternity Dx	Any	1	100%	50%
Prev Lab Path Codes	25 Hydroxy	CPT	82306		25 Hydroxy Includes Fractions If Performed	Well Preventive Encounter Dx or Diabetes Dx	Any	1	100%	50%
Prev Lab Path Codes	Magnesium	CPT	83735		Assay Of Magnesium	Well Preventive Encounter Dx or Diabetes Dx	Any	1	100%	50%
Prev Lab Path Codes	TSH/Thyroxine/Hypothyroidism	CPT	84443		Assay Of Thyroid Stimulating Hormone Tsh	Well Preventive Encounter Dx or Diabetes Dx or Maternity Dx	Any	1	100%	50%
Prev Lab Path Codes	TSH/Thyroxine/Hypothyroidism	CPT	84436		Total Thyroxine	Well Preventive Encounter Dx or Diabetes Dx or Maternity Dx	Any	1	100%	50%
Prev Lab Path Codes	TSH/Thyroxine/Hypothyroidism	CPT	84437		Thyroxine; Requiring Elution (Eg, Neonatal)	Well Preventive Encounter Dx or Diabetes Dx or Maternity Dx	Any	1	100%	50%
ACA Diabetes Screening	Hemoglobin A1C	CPT	83036		Hemoglobin; Glycosylated (A1C)	Well Preventive Encounter Dx or Diabetes Dx or Maternity Dx	Any	4	100%	50%
ACA Diabetes Screening	Hemoglobin A1C	CPT	83037		Glycosylated (A1C) By Device Cleared By FDA For Home Use	Well Preventive Encounter Dx or Diabetes Dx or Maternity Dx	Any	4	100%	50%
ACA Diabetes Screening	Microalbumin nephrology	CPT	82043		Urine, Microalbumin, Quantitative	Well Preventive Encounter Dx or Diabetes Dx	Any	2	100%	50%
ACA Diabetes Screening	Microalbumin nephrology	CPT	82044		Urine, Microalbumin, Semiquantitative (Eg. Reagent Strip Assay)	Well Preventive Encounter Dx or Diabetes Dx	Any	2	100%	50%
ACA Diabetes Screening	Glucose/Diabetes Screening	CPT	82947		Glucose; Quantitative, Blood (Except Reagent Strip).	Well Preventive Encounter Dx or Diabetes Dx	Any	1	100%	50%
ACA Diabetes Screening	Glucose/Diabetes Screening	CPT	82950		Glucose; Post Glucose Dose (Includes Glucose)	Well Preventive Encounter Dx or Diabetes Dx	Any	1	100%	50%
ACA Diabetes Screening	Glucose/Diabetes Screening	CPT	82951		Oral Glucose; Tolerance Test (GTT), 3 Specimens (Includes Glucose)	Well Preventive Encounter Dx or Diabetes Dx	Any	1	100%	50%
ACA Diabetes Screening	Glucose/Diabetes Screening	CPT	82952		Glucose; Tolerance Test, Each Additional Beyond 3 Specimens	Well Preventive Encounter Dx or Diabetes Dx	Any	1	100%	50%
Maternity Diabetes Screening	Maternity Diabetes Screening	CPT	82947		Glucose; Quantitative, Blood (Except Reagent Strip).	Maternity Dx	Any	2	100%	50%
Maternity Diabetes Screening	Maternity Diabetes Screening	CPT	82950		Glucose; Post Glucose Dose (Includes Glucose)	Maternity Dx	Any	2	100%	50%
Maternity Diabetes Screening	Maternity Diabetes Screening	CPT	82951		Oral Glucose; Tolerance Test (GTT), 3 Specimens (Includes Glucose)	Maternity Dx	Any	2	100%	50%
Maternity Diabetes Screening	Maternity Diabetes Screening	CPT	82952		Glucose; Tolerance Test, Each Additional Beyond 3 Specimens	Maternity Dx	Any	2	100%	50%