

Reimbursement Policy

Emergency Department Evaluation and Management Services

REIMBURSEMENT POLICY NUMBER: 11

Effective Date: 10/1/2026

Last Review Date: 9/2026

Next Annual Review: 9/2027

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INSTRUCTIONS FOR USE: Company reimbursement policies serve as guidance for the administration of plan benefits, reimbursement methodologies, and acceptable billing practices, intended to help health care providers submit claims accurately in order to reduce delays and ensure more accurate claim adjudication. Reimbursement policies do not constitute a guarantee of coverage. They allow for the consistent application of our member contracts, provider contracts, clinical edits, and medical policies. In the event of a conflict between one of these documents and a reimbursement policy, these documents will take precedent over the reimbursement policy. If contracts and policies are silent, the Company may defer to guidance from the Centers for Medicare & Medicaid Services (CMS) when available and applicable. In addition to correct billing practices, in order to qualify for reimbursement, all services, items, and procedures must be covered member benefits and must also meet applicable authorization and medical necessity guidelines. Company reimbursement policies are reviewed annually. The Companies reserve the right to determine the application of reimbursement policies and make revisions to reimbursement policies at any time.

SCOPE AND APPLICATION

Provider Type:

- ☒ Professional Claims
- ☐ DMEPOS Suppliers
- ☐ All health care services billed on CMS 1500 forms
- ☐ All health care services billed on CMS 1500 forms, and when specified to those billed on UB04 forms

Plan Product:

- ☒ Commercial
- ☒ Medicare
- ☐ Medicaid/Oregon Health Plan (OHP)

SCOPE: Providence Health Plan, Providence Health Assurance, and Providence Plan Partners as applicable (referred to individually as "Company" and collectively as "Companies").

POLICY STATEMENT

Exceptions to the below policy criteria, include:

- Emergency Department (ED) visits resulting in inpatient admission. These will follow the guidelines outlined in **Reimbursement Policy 6: Outpatient Hospital Services Rendered Prior to an Inpatient Admission**. *If a member is admitted as an inpatient from the ED, the ED services provided to that member must be submitted on the same claim as the inpatient services and are not subject to this policy.*
- Facilities under a case-rate agreement
- Trauma or critical care services
- Surgical intensive care services

Professional

- I. When a physician bills an emergency department (ED) visit involving an evaluation and management (E&M) code level 4 (99284) or level 5 (99285) with a low acuity non emergent (LANE) diagnosis code indicating a lower level of complexity or severity, the claim will be **denied as not reimbursable**.
 - A. *In order to be considered for reimbursement, a provider reconsideration request must be submitted with additional documentation to support the clinical appropriateness of a low acuity diagnosis code with a higher-level E&M code.*

Note: a complete list of the diagnosis codes which are considered low acuity and non-emergent are included in [Appendix I](#) below.

Facility

- II. Providence Health Plan and Providence Health Assurance will utilize the Optum Emergency Department Claims (EDC) Analyzer to determine the appropriateness of the ED E&M level to be reimbursed.
 - A. ED facility claims are subject to the EDC Analyzer when all of the following criteria are met:
 1. Claim is submitted on a UB04 or 837I claim form; **and**
 2. CPT® code 99283, 99284 or 99285 is billed; **and**
 3. Discharge status code is 01, 06, or 07.
 - B. The analyzer assesses the reported level of service against submitted claim data (including procedure codes, diagnosis codes, and revenue codes).
 - C. When the billed ED level is not supported by the documented intensity of services, payment may be adjusted to the level supported by documentation or denied in accordance with the provider contract, requiring correction to the appropriate level of service.

Note: use of the Optum EDC Analyzer does not apply to:

- Wrap-network, out-of-network, or case rate ED facility contracts
- Inpatient facility claims
- Critical care services (CPT® codes 99291 and 99292)
- Members who are less than 2 years old

POLICY GUIDELINES

DOCUMENTATION REQUIREMENTS

In order to provide an effective and accurate review of any reconsideration requests, the following documentation **must** be provided. If any of these items are not submitted, the review may be delayed and any decision outcome could be affected:

- Reconsideration letter summarizing the basis for the appeal; and
- Applicable medical records
 - Physician order(s)
 - Presenting symptoms
 - Diagnoses and treatment plan
 - The medical records must provide documentation of the acuity, complexity, and severity that supports a level 4 or level 5 emergency department evaluation and management service.

BACKGROUND

This policy addresses appropriate emergency department (ED) evaluation and management (E&M) levels based on the complexity of the condition treated in the ED. In the absence of national standards, the American College of Emergency Physicians (ACEP) developed ED level guidelines for assessing the appropriate level of E&M assigned to those services.¹ See [Table 2](#) below.

Optum Emergency Department Claims (EDC) Analyzer

The Optum Emergency Department Claims (EDC) Analyzer is a nationally recognized tool designed to assess billed ED facility E/M levels by analyzing reported claim data, including diagnosis codes, procedure codes, and revenue codes, and comparing them to established benchmarks of services typically associated with each ED level.⁵

The EDC Analyzer supports objective review of ED facility claims by identifying whether the billed level of service is supported by the reported intensity of services. Use of this tool helps ensure that ED facility reimbursement aligns with documented resource utilization, reduces variation in ED facility level billing, and supports compliance with provider contracts and applicable reimbursement standards.

DEFINITIONS

Acuity

Patient acuity means the measure of a patient's severity of illness or medical conditions including, but not limited to, the stability of physiological and psychological parameters and the dependency needs of the patient. Higher patient acuity requires more intensive time and skills.²

Non-Emergent Conditions

Care for conditions for which a delay of several hours would not increase the likelihood of an adverse outcome, planned or elective procedures, and/or care that does not require an inpatient setting.³

Definitions for Discharge Instructions per the American College of Emergency Physicians (ACEP)¹

Straightforward

Self-limited condition with no meds or home treatment required, signs and symptoms of wound infection explained, return to ED if problems develop.

Simple

OTC medications or treatment, simple dressing changes; patient demonstrates understanding quickly and easily.

Moderate

Head injury instructions, crutch training, bending, lifting, weight-bearing limitations, prescription medication with review of side effects and potential adverse reactions; patient may have questions, but otherwise demonstrates adequate understanding of instructions either verbally or by demonstration.

Complex

Multiple prescription medications and/or home therapies with review of side effects and potential adverse reactions; diabetic, seizure or asthma teaching in compromised or non-compliant patients; patient/caregiver may demonstrate difficulty understanding instructions and may require additional directions to support compliance with prescribed treatment.

CENTERS FOR MEDICARE AND MEDICAID SERVICES (CMS)

The Centers for Medicare and Medicaid Services (CMS) acknowledge that the reasons and resources reflected in a hospital component of a visit would be different than the physician component (hospitals bill for overhead, while physicians bill for performing the service). Therefore, CMS has instructed hospitals to develop internal guidelines to determine what level of visit to report for each patient.

In the 2008 Final Rule, CMS stated, “we note our expectation that hospitals’ internal guidelines would comport with the principles listed below.”⁴

- (1) The coding guidelines should follow the intent of the CPT code descriptor in that the guidelines should be designed to reasonably relate the intensity of hospital resources to the different levels of effort represented by the code (65 FR 18451).
- (2) The coding guidelines should be based on hospital facility resources. The guidelines should not be based on physician resources (67 FR 66792).
- (3) The coding guidelines should be clear to facilitate accurate payments and be usable for compliance purposes and audits (67 FR 66792).
- (4) The coding guidelines should meet the HIPAA requirements (67 FR 66792).
- (5) The coding guidelines should only require documentation that is clinically necessary for patient care (67 FR 66792).
- (6) The coding guidelines should not facilitate upcoding or gaming (67 FR 66792).

Additional guidelines added by CMS for coding and billing emergency department visits include:

- (7) The coding guidelines should be written or recorded, well-documented, and provide the basis for selection of a specific code.
- (8) The coding guidelines should be applied consistently across patients in the clinic or emergency department to which they apply.
- (9) The coding guidelines should not change with great frequency.
- (10) The coding guidelines should be readily available for fiscal intermediary (or, if applicable, MAC) review.
- (11) The coding guidelines should result in coding decisions that could be verified by other hospital staff, as well as outside sources.

The above criteria and reimbursement methodologies are consistent with the CMS guidance regarding appropriate coding and billing of emergency department billing for **facilities**.

BILLING AND CODING GUIDELINES

Services provided in the ED billed with E&M CPT codes 99281 – 99285, which represent five levels.

Table 1: Applicable CPT Codes and Descriptions

CPT Code	Description
99281	Emergency department visit for the evaluation and management of a patient that may not require the presence of a physician or other qualified health care professional
99282	Emergency department visit for the evaluation and management of a patient, which requires a medically appropriate history and/or examination and straightforward medical decision making
99283	Emergency department visit for the evaluation and management of a patient, which requires a medically appropriate history and/or examination and low level of medical decision making

99284	Emergency department visit for the evaluation and management of a patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making
99285	Emergency department visit for the evaluation and management of a patient, which requires a medically appropriate history and/or examination and high level of medical decision making

Table 2: ACEP ED Facility Level Coding Guidelines¹

Note: The table below is not all-inclusive. It provides examples of facility and physician intervention that align with the E&M service.

Level	Possible Interventions	Potential Symptoms/Examples Which Support the Interventions
Level I: 99281	- Initial Assessment - No medication or treatments - Rx refill only, asymptomatic - Note for Work or School - Wound recheck. - Booster or follow up immunization, no acute injury. - Dressing changes (uncomplicated) - Suture removal (uncomplicated) - Discussion of Discharge - Instructions (Straightforward)	- Insect bite (uncomplicated) - Read Tb test
Level II: 99282	Could include interventions from previous levels, plus any of: - Tests by ED Staff (Urine dip, stool hemocult, AccuCheck or Dextrostix) - Visual Acuity (Snellen) - Obtain clean catch urine. - Apply ace wrap or sling. - Prep or assist w/ procedures such as: minor laceration repair, I&D of simple abscess, etc. - Discussion of Discharge Instructions (Simple)	- Localized skin rash, lesion, sunburn - Minor viral infection - Eye discharge- painless - Ear Pain - Urinary frequency without fever - Simple trauma (with no X-rays)
Level III: 99283	Could include interventions from previous levels, plus any of: - Receipt of EMS/Ambulance patient - Heparin/saline lock - Nebulizer treatment - Preparation for lab tests described in CPT (80048-87999 codes) Preparation for EKG - Preparation for plain X-rays of only 1 area (hand, shoulder, pelvis, etc.) - Prescription medications administered PO. - Foley catheters; In & Out cath - C-Spine precautions - Fluorescein stain - Emesis/ Incontinence care	- Minor trauma (with potential complicating factors) - Medical conditions requiring prescription drug management. - Fever which responds to antipyretics - Headache - History of, no serial exam - Head injury- without neurologic symptoms. - Eye pain - Mild dyspnea -not requiring oxygen

	• Prep or assist w/procedures such as: joint aspiration/injection, simple fracture care etc. • Mental Health-anxious, simple treatment • Routine psych medical clearance • Limited social worker intervention • Post-mortem care • Direct Admit via ED • Discussion of Discharge Instructions (Moderate Complexity)	
Level IV: 99284	Could include interventions from previous levels, plus any of: • Preparation for 2 diagnostic tests2: (Labs, EKG, X-ray) • Prep for plain X-ray (multiple body areas): • C-spine & foot, shoulder & pelvis • Prep for special imaging study (CT, MRI, Ultrasound, VQ scans) • Cardiac Monitoring (2) Nebulizer treatments • Port-A-Cath venous access • Administration and Monitoring of infusions or parenteral medications (IV, IM, IO, SC) NG/PEG • Tube Placement/Replacement Multiple reassessments. • Prep or assist w/procedures such as: eye irrigation with Morgan lens, bladder irrigation with 3-way foley, pelvic exam, etc. • Sexual Assault Exam w/ out specimen collection Psychotic patient; not suicidal • Discussion of Discharge Instructions (Complex)	• Blunt/ penetrating trauma- with limited diagnostic testing • Headache with nausea/ vomiting • Dehydration requiring treatment. • Vomiting requiring treatment. • Dyspnea requiring oxygen. • Respiratory illness relieved with (2) nebulizer treatments. • Chest Pain--with limited diagnostic testing • Abdominal Pain - with limited diagnostic testing • Non-menstrual vaginal bleeding • Neurologic symptoms - with limited diagnostic testing
Level V: 99285	Could include interventions from previous levels, plus any of: • Requires frequent monitoring of multiple vital signs (i.e., O2 sat, BP, cardiac rhythm, respiratory rate) • Preparation for ≥ 3 diagnostic tests2: (Labs, EKG, X-ray) • Prep for special imaging study (CT, MRI, Ultrasound, VQ scan) combined with multiple tests or parenteral medication or oral or IV contrast. • Administration of Blood Transfusion/Blood Products Oxygen via face mask or NRB • Multiple Nebulizer Treatments: (3) or more (if nebulizer is continuous, each 20-minute period is considered treatment) • Moderate Sedation	• Blunt/ penetrating trauma requiring multiple diagnostic tests. • Systemic multi-system medical emergency requiring multiple diagnostics. • Severe infections requiring IV/IM antibiotics. • Uncontrolled DM • Severe burns • Hypothermia • New onset altered mental status • Headache (severe): CT and/or LP • Chest Pain--multiple diagnostic tests/treatments • Respiratory illness--relieved by (3) or more nebulizer treatments

	• Prep or assist with procedures such as: central line insertion, gastric lavage, LP, paracentesis, etc. • Cooling or heating blanket • Extended Social Worker intervention • Sexual Assault Exam w/ specimen collection by ED staff • Coordination of hospital admission/transfer or change in living situation or site. • Physical/Chemical restraints • Suicide Watch • Critical Care less than 30 minutes	• Abdominal Pain--multiple diagnostic tests/treatments • Major musculoskeletal injury • Acute peripheral vascular compromise of extremities • Neurologic symptoms - multiple diagnostic tests/treatments • Toxic ingestions • Mental health problem - suicidal/homicidal
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Low Acuity Non-Emergent Diagnosis Codes

A complete list of the diagnosis codes which are considered low acuity and non-emergent are included in [Appendix I](#) below.

CROSS REFERENCES

- [Facility Routine Supplies and Services](#), RP43
- [Outpatient Hospital Services Rendered Prior to an Inpatient Admission](#), RP6
- [Reasonable Billing Practices](#), CP78.0

REFERENCES

1. American College of Emergency Physicians: ED Facility Level Coding Guidelines. <https://www.acep.org/administration/reimbursement/ed-facility-level-coding-guidelines>. Accessed 6/27/2024.
2. Law Insider: Patient acuity definition. <https://www.lawinsider.com/dictionary/patient-acuity>. Accessed 6/27/2024.
3. Providence Health Plan Utilization Management Department standard definition: non-emergent conditions. Last reviewed 6/27/2024.
4. Centers for Medicare and Medicaid Services (CMS). Federal Register / Vol. 72, No. 227 / Tuesday, November 27, 2007 / Rules and Regulations. <https://www.govinfo.gov/content/pkg/FR-2007-11-27/pdf/07-5507.pdf>. Accessed 6/24/2024.
5. Optum Emergency Department Claim Analyzer – Facility. [Emergency Department Claim \(EDC\) Analyzer | Optum Business](#). Accessed 4/28/2026.

POLICY REVISION HISTORY

Date	Revision Summary
8/2024	New reimbursement policy
5/2025	Interim update; add CAH facilities to scope of policy

9/2025	Annual review
7/2026	Interim update; implementation of Optum EDC Analyzer
10/2026	Annual review, no changes

APPENDICES

Appendix I: Low Acuity Non-Emergent Diagnosis Codes

A64	F513	H0014	H10412
B002	F514	H0015	H10413
B009	F515	H0016	H10419
B019	F518	H0019	H1045
B029	F519	H01001	H10501
B070	F952	H01002	H10502
B079	F958	H01003	H10503
B081	F959	H01004	H10509
B084	F985	H01005	H10511
B085	G43109	H01006	H10512
B09	G43809	H01009	H10513
B2780	G43909	H019	H10519
B2790	G43B0	H10011	H1089
B2799	G43C0	H10012	H109
B338	G43D0	H10013	H11001
B350	G441	H10019	H11002
B354	G44209	H10021	H11003
B355	G5600	H10022	H11009
B370	G5601	H10023	H11011
B373	G5602	H10029	H11012
B3783	G5621	H1010	H11013
B379	G5622	H1011	H11019
B86	G5631	H1012	H11041
B9710	G5691	H1013	H11042
B9711	G5692	H10231	H11043
B974	G609	H10232	H11049
B9789	G8929	H10233	H11152
E109	H00011	H10239	H11153
E118	H00012	H1030	H11222
E119	H00013	H1031	H11412
F508	H00014	H1032	H11421
F509	H00015	H1033	H11422
F5101	H00016	H10401	H11423
F5102	H00019	H10402	H11429
F5103	H0011	H10403	H1189
F5109	H0012	H10409	H119
F5119	H0013	H10411	H5710

H578	H608X2	H65114	H6643
H60311	H608X3	H65115	H6690
H60312	H608X9	H65116	H6691
H60313	H6090	H65117	H6692
H60319	H6091	H65119	H6693
H60331	H6092	H65191	H68101
H60332	H6093	H65192	H68102
H60333	H61101	H65193	H68103
H60339	H61102	H65194	H68109
H60391	H61103	H65195	H6980
H60392	H61109	H65196	H6981
H60393	H61191	H65197	H6982
H60399	H61192	H65199	H6983
H60501	H61193	H6520	H833X1
H60502	H61199	H6521	H833X2
H60503	H6120	H6522	H833X3
H60509	H6121	H6523	H833X9
H60511	H6122	H65411	H9201
H60512	H6123	H65412	H9202
H60513	H61891	H65413	H9203
H60519	H61892	H65419	H9209
H60521	H61893	H65491	H9210
H60522	H61899	H65492	H9211
H60523	H6190	H65493	H9212
H60529	H6191	H65499	H9213
H60531	H6192	H6590	H9220
H60532	H6193	H6591	H9221
H60533	H6240	H6592	H9222
H60539	H6241	H6593	H9223
H60541	H6242	H66001	H9311
H60542	H6243	H66002	H9312
H60543	H628X1	H66003	H9313
H60549	H628X2	H66004	H9319
H60551	H628X3	H66005	H93291
H60552	H628X9	H66006	H93292
H60553	H6500	H66007	H93293
H60559	H6501	H66009	H93299
H60591	H6502	H6611	H938X1
H60592	H6503	H6612	H938X2
H60593	H6504	H6613	H938X3
H60599	H6505	H663X1	H938X9
H6060	H6506	H663X2	H9390
H6061	H6507	H663X3	H9391
H6062	H65111	H6640	H9392
H6063	H65112	H6641	H9393
H608X1	H65113	H6642	H9480

H9481	K1370	L237	L603
H9482	K1379	L2381	L604
H9483	K4090	L2389	L605
I10	K429	L239	L608
I129	K5090	L240	L609
J00	K5190	L241	L62
J0380	K522	L242	L630
J0381	K5289	L243	L631
J0390	K529	L244	L632
J0391	K5732	L245	L638
J040	K5792	L246	L639
J300	K580	L247	L640
J301	K589	L2481	L648
J302	K591	L2489	L649
J305	K598	L249	L651
J3081	K599	L250	L652
J3089	K601	L251	L658
J309	K602	L252	L659
J310	K640	L253	L660
J320	K641	L254	L662
J321	K642	L255	L663
J322	K643	L258	L668
J323	K644	L259	L669
J324	K649	L270	L700
J328	K8020	L271	L701
J329	L0292	L272	L703
J340	L0293	L279	L705
J341	L0591	L299	L708
J3489	L0592	L300	L709
J349	L089	L301	L720
J40	L2081	L302	L723
J410	L2082	L308	L728
J411	L2084	L309	L729
J418	L2089	L42	L730
J42	L209	L500	L731
K009	L210	L509	L732
K010	L218	L550	L738
K011	L219	L551	L739
K044	L22	L559	L740
K0510	L230	L562	L741
K1120	L231	L563	L742
K1121	L232	L569	L743
K120	L233	L578	L744
K131	L234	L600	L74510
K134	L235	L601	L74511
K136	L236	L602	L74512

L74513	M5431	M7651	M79672
L74519	M5432	M7652	M79673
L7452	M5440	M7660	M79674
L748	M5441	M7661	M79675
L749	M5442	M7662	M797
L750	M546	M7671	M7989
L751	M5489	M76891	M940
L752	M549	M76892	N3010
L758	M6088	M76899	N3080
L759	M609	M769	N3090
L84	M6248	M7710	N341
L853	M62830	M7711	N342
L983	M62831	M7712	N368
M109	M62838	M7731	N390
M2390	M65812	M7732	N393
M2391	M65832	M7742	N3941
M2392	M65841	M7750	N3942
M25461	M65842	M7751	N3944
M25462	M65862	M7752	N3945
M25469	M6588	M778	N3946
M2550	M67351	M779	N39490
M25511	M67352	M791	N398
M25512	M67361	M792	N399
M25519	M67362	M79601	N644
M25521	M7021	M79602	N763
M25522	M7022	M79603	N8320
M25529	M7041	M79604	N8329
M25531	M7051	M79605	R040
M25532	M7052	M79606	R05
M25539	M7061	M79609	R064
M25561	M7062	M79621	R066
M25562	M7071	M79622	R070
M25569	M722	M79631	R093
M25571	M75102	M79632	R0981
M25572	M7521	M79641	R110
M25579	M7522	M79642	R140
M2660	M7531	M79643	R141
M2669	M7541	M79644	R142
M2679	M7542	M79645	R143
M5117	M7551	M79646	R194
M533	M7552	M79651	R195
M5410	M7581	M79652	R197
M5416	M7582	M79661	R198
M5417	M7591	M79662	R21
M542	M7631	M79669	R221
M5430	M7632	M79671	R222

R2230	S00439A	S2096XA	S46219A
R2231	S00461A	S2341XA	S46311A
R2232	S00462A	S239XXA	S46312A
R2233	S00469A	S29011A	S46319A
R2241	S00511A	S29012A	S46811A
R2242	S00512A	S29019A	S46812A
R2243	S00531A	S300XXA	S46819A
R229	S00532A	S30810A	S46911A
R232	S00561A	S30811A	S46912A
R233	S00562A	S30815A	S46919A
R234	S0086XA	S30816A	S50311A
R238	S0096XA	S30817A	S50312A
R239	S038XXA	S30860A	S50319A
R252	S039XXA	S30861A	S50361A
R300	S100XXA	S30862A	S50362A
R309	S1016XA	S30863A	S50369A
R350	S1081XA	S30864A	S50811A
R351	S1086XA	S30865A	S50812A
R358	S1091XA	S30866A	S50819A
R360	S1096XA	S30867A	S50861A
R369	S134XXA	S335XXA	S50862A
R3911	S138XXA	S338XXA	S50869A
R3912	S139XXA	S339XXA	S6000XA
R3913	S161XXA	S39011A	S60011A
R3914	S20111A	S39012A	S60012A
R3915	S20112A	S39013A	S60019A
R3916	S20119A	S43401A	S60021A
R3919	S20161A	S43402A	S60022A
R42	S20162A	S43409A	S60029A
R498	S20169A	S43491A	S60031A
R52	S20211A	S43492A	S60032A
R5381	S20212A	S43499A	S60039A
R5383	S20219A	S4360XA	S60041A
R590	S20311A	S4361XA	S60042A
R591	S20312A	S4362XA	S60049A
R599	S20319A	S4390XA	S60051A
R61	S20361A	S4391XA	S60052A
S0006XA	S20362A	S4392XA	S60059A
S0031XA	S20369A	S46011A	S6010XA
S0033XA	S20411A	S46012A	S60111A
S0036XA	S20412A	S46019A	S60112A
S00411A	S20419A	S46111A	S60119A
S00412A	S20461A	S46112A	S60121A
S00419A	S20462A	S46119A	S60122A
S00431A	S20469A	S46211A	S60129A
S00432A	S2091XA	S46212A	S60131A

S60132A	S62653A	S63681A	S66412A
S60139A	S62654A	S63682A	S66419A
S60141A	S62655A	S63689A	S66510A
S60142A	S62656A	S63690A	S66511A
S60149A	S62657A	S63691A	S66512A
S60151A	S62658A	S63692A	S66513A
S60152A	S62659A	S63693A	S66514A
S60159A	S62660A	S63694A	S66515A
S60221A	S62661A	S63695A	S66516A
S60222A	S62662A	S63696A	S66517A
S60229A	S62663A	S63697A	S66518A
S60311A	S62664A	S63698A	S66519A
S60312A	S62665A	S63699A	S66811A
S60319A	S62666A	S638X1A	S66812A
S60410A	S62667A	S638X2A	S66819A
S60411A	S62668A	S638X9A	S66911A
S60412A	S62669A	S6390XA	S66912A
S60413A	S63501A	S6391XA	S66919A
S60414A	S63502A	S6392XA	S7010XA
S60415A	S63509A	S66011A	S70211A
S60416A	S63601A	S66012A	S70212A
S60417A	S63602A	S66019A	S70219A
S60418A	S63609A	S66110A	S70261A
S60419A	S63610A	S66111A	S70262A
S60511A	S63611A	S66112A	S70269A
S60512A	S63612A	S66113A	S70311A
S60519A	S63613A	S66114A	S70312A
S60811A	S63614A	S66115A	S70319A
S60812A	S63615A	S66116A	S70361A
S60819A	S63616A	S66117A	S70362A
S60861A	S63617A	S66118A	S70369A
S60862A	S63618A	S66119A	S73101A
S60869A	S63619A	S66211A	S73102A
S62640A	S63621A	S66212A	S73109A
S62641A	S63622A	S66219A	S76911A
S62642A	S63629A	S66310A	S76912A
S62643A	S63630A	S66311A	S76919A
S62644A	S63631A	S66312A	S8000XA
S62645A	S63632A	S66313A	S8001XA
S62646A	S63633A	S66314A	S8002XA
S62647A	S63634A	S66315A	S8010XA
S62648A	S63635A	S66316A	S8011XA
S62649A	S63636A	S66317A	S8012XA
S62650A	S63637A	S66318A	S80211A
S62651A	S63638A	S66319A	S80212A
S62652A	S63639A	S66411A	S80219A

S80261A	S90519A	S92535A	S96911A
S80262A	S90561A	S92536A	S96912A
S80269A	S90562A	S93401A	S96919A
S80811A	S90569A	S93402A	T148
S80812A	S92404A	S93409A	T1490
S80819A	S92405A	S93491A	T7840XA
S80861A	S92406A	S93492A	T7849XA
S80862A	S92414A	S93499A	Z00.00-Z13.9
S80869A	S92415A	S93601A	Z14.1-Z15.89
S8390XA	S92416A	S93602A	Z16.10-Z16.39
S8391XA	S92424A	S93609A	Z17.0-Z17.421
S8392XA	S92425A	S96011A	Z18.01-Z18.9
S86011A	S92426A	S96012A	Z19.1-Z19.2
S86012A	S92504A	S96019A	Z20.01-Z29.9
S86019A	S92505A	S96111A	Z30.01-Z39.2
S86911A	S92506A	S96112A	Z40.00-Z53.9
S86912A	S92514A	S96119A	Z55.0-Z65.9
S86919A	S92515A	S96211A	Z66
S9030XA	S92516A	S96212A	Z67.1-Z67.A4
S9031XA	S92524A	S96219A	Z68.1-Z68.56
S9032XA	S92525A	S96811A	Z69.010-Z76.89
S90511A	S92526A	S96812A	Z77.010-Z99.89
S90512A	S92534A	S96819A	