

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	0001F	hrt failure assessed	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0005F	osteoarthritis composite	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0012F	community-acquired bacterial pneumonia asmt	1/1/2007	12/31/2078
BENE - Maine Excluded Services	0014F	comp preop assess cataract surg w/iol placemnt	1/1/2008	12/31/2078
BENE - Maine Excluded Services	0015F	melanoma follow up completed	1/1/2008	12/31/2078
BENE - Maine Excluded Services	0016T	dstrj loclzd les choroid transpupillary thermoth	1/1/2002	12/31/2078
BENE - Maine Excluded Services	0017T	dstrj macular drusen pc	1/1/2002	12/31/2078
BENE - Maine Excluded Services	0019T	extracorporeal shock wave muscskel nos low enrgy	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0030T	antiprothrombin antibody each ig class	1/1/2003	12/31/2078
BENE - Maine Excluded Services	0042T	cerebral perfusion analys ct w/blood flow&volume	1/1/2003	12/31/2078
BENE - Maine Excluded Services	0048T	impltj ventr assist dev xtrcorp prq t-septal	1/1/2004	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	0050T	rmvl ventr dev xtrcorp prq t-septal 1/dual	1/1/2004	12/31/2078
BENE - Maine Excluded Services	0051T	impltj tot rplcmt hrt sys w/rcp cardiectomy	1/1/2004	12/31/2078
BENE - Maine Excluded Services	0052T	rplcmt/rpr thrc unit tot rplcmt hrt sys	1/1/2004	12/31/2078
BENE - Maine Excluded Services	0053T	rplcmt/rpr impltbl compnt tot rplcmt hrt ex thrc	1/1/2004	12/31/2078
BENE - Maine Excluded Services	0054T	cptr-asst musckel navigj ortho fluor images	1/1/2009	12/31/2078
BENE - Maine Excluded Services	0055T	cptr-asst musckel navigj ortho ct/mri	1/1/2009	12/31/2078
BENE - Maine Excluded Services	0071T	us ablatj uterine leiomyomata < 200 cc tissue	1/1/2005	12/31/2078
BENE - Maine Excluded Services	0072T	us ablatj uterine leiomyomat >/equal 200 cc tiss	1/1/2005	12/31/2078
BENE - Maine Excluded Services	0073T	compnstr-based beam modlj tx dlvr inverse 3> fld	1/1/2005	12/31/2014
BENE - Maine Excluded Services	0075T	tcatt plmt xtrc vrt crtd stent rs&i prq 1st vsl	1/1/2005	12/31/2078
BENE - Maine Excluded Services	0076T	tcatt plmt xtrc vrt crtd stent rs&iprq ea vsl	1/1/2005	12/31/2078
BENE - Maine Excluded Services	0078T	evasc rpr aaa pseudoarysm abdl aorta visc	1/1/2006	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	0079T	plmt visc xtn prosth evasc rpr aaa ea visc	1/1/2005	12/31/2078
BENE - Maine Excluded Services	0080T	evasc rpr aaa pseudoarysm abdl aorta visc rs&i	1/1/2005	12/31/2078
BENE - Maine Excluded Services	0081T	plmt visc xtn prosth evasc rpr aaa ea visc rs&i	1/1/2005	12/31/2078
BENE - Maine Excluded Services	0085T	breath test heart transplant rejection	1/1/2005	12/31/2078
BENE - Maine Excluded Services	0092T	tot disc arthrp ant appr dske prep crv ea ntrspc	1/1/2009	12/31/2014
BENE - Maine Excluded Services	0095T	rmvl tot disc arthrp ant appr crv ea ntrspc	1/1/2009	12/31/2078
BENE - Maine Excluded Services	0098T	revj tot disc arthrp ant appr crv ea ntrspc	1/1/2009	12/31/2078
BENE - Maine Excluded Services	0099T	impltj intrastromal corneal ring segments	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0100T	plmt scjncl rta prosth&ppls&impltj intra-oc rta	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0101T	extrcorpl shock wave muscskele nos high energy	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0102T	extrcrpl shock wave w/anes lat humerl epicondyle	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0103T	holotranscobalamin quantitative	1/1/2006	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	0104T	inert gas rbrthing car output meas rest	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0105T	inert gas rbrthing car output meas xers	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0106T	quant sensory test&interpj/xtr w/touch stimuli	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0107T	quant sensory test&interpj/xtr w/vibrj stimuli	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0108T	quant sensory test&interpj/xtr w/cool stimuli	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0109T	quant senaory test&interpj/xtr w/ht-pn stimuli	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0110T	quant sensory test&interpj/xtr other stimuli	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0111T	long-chain omega-3 fatty acids rbc membs	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0123T	fistulization sclera glaucoma ciliary body	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0124T	conjunctvl inc w/post xtrsclera plcmt pharm agnt	1/1/2009	12/31/2078
BENE - Maine Excluded Services	0126T	common carotid intima media thickness study	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0130T	1-pt chrnc care drugs invstgj	1/1/2006	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	0140T	exhaled breath condensate ph	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0141T	pncrtc islet cell trnsplj portal perq	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0142T	pncrtc islet cell trnsplj portal opn	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0143T	laps pncrtc islet cell trnsplj	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0153T	IMPLANT ANEUR SENSOR ADD-ON	1/1/2007	12/31/2078
BENE - Maine Excluded Services	0154T	IMPLANT ANEUR SENSOR STUDY	1/1/2007	12/31/2078
BENE - Maine Excluded Services	0155T	laparoscopic impltj/rplcmt gastric electrode	1/1/2007	12/31/2078
BENE - Maine Excluded Services	0156T	laps revj/rmv1 gastric eltrd < curvature	1/1/2007	12/31/2078
BENE - Maine Excluded Services	0157T	laparotomy impltj/rplcmt gastric electrode	1/1/2007	12/31/2078
BENE - Maine Excluded Services	0158T	lapt revj/rmv1 gastric eltrd < curvature	1/1/2007	12/31/2078
BENE - Maine Excluded Services	0159T	computer aided detection breast mri	1/1/2007	12/31/2078
BENE - Maine Excluded Services	0160T	transcranial mag stimj tx planning	1/1/2007	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	0161T	transcranial mag stimj tx dlvr & mgmt	1/1/2007	12/31/2078
BENE - Maine Excluded Services	0163T	tot disc arthrp ant appr dskc prep lmbr ea	1/1/2009	12/31/2078
BENE - Maine Excluded Services	0164T	rmvl tot disc arthrp ant appr lmbr ea ntrspc	1/1/2009	12/31/2078
BENE - Maine Excluded Services	0165T	revj tot disc arthrp ant appr lmbr ea ntrspc	1/1/2009	12/31/2078
BENE - Maine Excluded Services	0166T	transmyocardial closure v-septl dfct w/o bypass	1/1/2007	12/31/2078
BENE - Maine Excluded Services	0167T	transmyocardial closure v-septl dfct w/bypass	1/1/2007	12/31/2078
BENE - Maine Excluded Services	0168T	rhinophototherapy application light bilateral	1/1/2007	12/31/2078
BENE - Maine Excluded Services	0169T	stereotactic placement catheter brain	1/1/2007	12/31/2078
BENE - Maine Excluded Services	0171T	pst spinous process device insert lmbr 1 lvl	1/1/2007	12/31/2078
BENE - Maine Excluded Services	0172T	pst spinous process device insert lmbr ea lvl	1/1/2007	12/31/2078
BENE - Maine Excluded Services	0173T	monitor intraocular press during vitrectomy	1/1/2007	12/31/2078
BENE - Maine Excluded Services	0174T	cad chest radiograph concurrent w/interpretation	1/1/2007	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	0175T	cad chest radiograph remote from primary interpj	1/1/2007	12/31/2078
BENE - Maine Excluded Services	0176T	aqueous canal trluml dilat w/o stent retention	1/1/2007	12/31/2078
BENE - Maine Excluded Services	0177T	aqueous canal trluml dilat w stent retention	1/1/2007	12/31/2078
BENE - Maine Excluded Services	0178T	64 lead ecg w/interpretation & report	7/1/2007	12/31/2078
BENE - Maine Excluded Services	0179T	64 lead ecg w/tracing & graphics	7/1/2007	12/31/2078
BENE - Maine Excluded Services	0180T	64 lead ecg w/interpretation & report only	7/1/2007	12/31/2078
BENE - Maine Excluded Services	0181T	corneal hysteresis air impulse stimj bi w/i&r	7/1/2007	12/31/2014
BENE - Maine Excluded Services	0182T	hdr electronic brachytherapy per fraction	7/1/2007	12/31/2078
BENE - Maine Excluded Services	0183T	low frequency wound ultrasound	1/1/2008	12/31/2078
BENE - Maine Excluded Services	0184T	rectal tumor excision transanal endoscopic	1/1/2008	12/31/2078
BENE - Maine Excluded Services	0185T	multivariate alys pt findings cptr probability	1/1/2008	12/31/2078
BENE - Maine Excluded Services	0186T	suprachoroidal pharmacologic agent delivery	1/1/2008	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	0187T	scanning cptrized oph dx img anterior i&r uni	1/1/2008	12/31/2078
BENE - Maine Excluded Services	0188T	videoconferenced critical care first 30- 74 min	7/1/2008	12/31/2078
BENE - Maine Excluded Services	0189T	videoconferenced critical care ea addl 30 min	7/1/2008	12/31/2078
BENE - Maine Excluded Services	0190T	intraocular radiation src applicator placement	7/1/2008	12/31/2078
BENE - Maine Excluded Services	0191T	ant segment insertion drainage w/o reservoir int	9/1/2010	12/31/2016
BENE - Maine Excluded Services	0192T	ant segment insertion drainage w/o reservoir ext	7/1/2008	12/31/2078
BENE - Maine Excluded Services	0193T	transurethral rf bladder neck microremodel	1/1/2009	12/31/2078
BENE - Maine Excluded Services	0195T	arthrodesis presacral intrbdy w/o instrum 15/s1	1/1/2009	12/31/2078
BENE - Maine Excluded Services	0196T	arthrodesis presacral intrbdy w/o instrum 14/15	1/1/2009	12/31/2078
BENE - Maine Excluded Services	0197T	ifxj loclz&trakg trgt/pt mtn dur radtx ea fxj	1/1/2009	12/31/2014
BENE - Maine Excluded Services	0198T	meas ocular blood flow repeat io pres samp w/i&r	1/1/2009	12/31/2078
BENE - Maine Excluded Services	0199T	physiol rec trmr w/accel & gyro freq&l & i&o	1/1/2010	12/31/2014

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	0200T	perq sac agmntj uni w/wo balo/mchnl dev 1/> ndl	1/1/2010	12/31/2078
BENE - Maine Excluded Services	0201T	perq sac agmntj bi w/wo balo/ mchnl dev 2/> ndls	1/1/2010	12/31/2078
BENE - Maine Excluded Services	0202T	post vert arthrplsty w/wo bone cement 1 lumb lvl	1/1/2010	12/31/2078
BENE - Maine Excluded Services	0203T	slpstd unat sim rec hrtrt oxsat rsp alys&slp tm	1/1/2010	12/31/2078
BENE - Maine Excluded Services	0204T	slpstd unat sim rec hrtrt oxsat rsp alys	1/1/2010	12/31/2078
BENE - Maine Excluded Services	0205T	iv cath coronary vessel/graft spectroscopy ea vsl	1/1/2010	12/31/2078
BENE - Maine Excluded Services	0206T	cptr dbs alys mlt cycls car elec dta 2/> ecg lds	1/1/2010	12/31/2078
BENE - Maine Excluded Services	0207T	evac meibomian glnds auto ht& intmt press uni	1/1/2010	12/31/2078
BENE - Maine Excluded Services	0208T	pure tone audiometry automated air only	1/1/2010	12/31/2078
BENE - Maine Excluded Services	0209T	pure tone audiometry automated air & bone	1/1/2010	12/31/2078
BENE - Maine Excluded Services	0210T	speech audiometry threshold automated	1/1/2010	12/31/2078
BENE - Maine Excluded Services	0211T	speech audiom threshld auto w/speech recognition	1/1/2010	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	0212T	compre audiom threshold eval & speech recog	1/1/2010	12/31/2078
BENE - Maine Excluded Services	0213T	njx dx/ther paraver fct jt w/us cer/thor 1 lvl	1/1/2010	12/31/2078
BENE - Maine Excluded Services	0214T	njx dx/ther paraver fct jt w/us cer/thor 2nd lvl	1/1/2010	12/31/2078
BENE - Maine Excluded Services	0215T	njx paravertbrl facet jt w/us cer/thor 3rd&> lvl	1/1/2010	12/31/2078
BENE - Maine Excluded Services	0216T	njx dx/ther paraver fct jt w/us lumb/sac 1 lvl	1/1/2010	12/31/2078
BENE - Maine Excluded Services	0217T	njx dx/ther paraver fct jt w/us lumb/sac lvl 2	1/1/2010	12/31/2078
BENE - Maine Excluded Services	0218T	njx paravertbrl fct jt w/us lumb/sac 3rd&> lvl	1/1/2010	12/31/2078
BENE - Maine Excluded Services	0219T	plmt post facet implant uni/bi w/img & grft cerv	1/1/2010	12/31/2078
BENE - Maine Excluded Services	0220T	plmt post facet implt uni/bi w/img & grft thor	1/1/2010	12/31/2078
BENE - Maine Excluded Services	0221T	plmt post facet implt uni/bi w/img & grft lumb	1/1/2010	12/31/2078
BENE - Maine Excluded Services	0222T	place posterior intrafacet implant addl segment	1/1/2010	12/31/2078
BENE - Maine Excluded Services	0236T	trluml periph athrc w/rs&i abdom aorta	1/1/2011	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	0237T	trluml periph athrc w/rs&i brchiocphl ea vsl	1/1/2011	12/31/2078
BENE - Maine Excluded Services	0238T	trluml peripheral atherectomy iliac artery ea	1/1/2011	12/31/2078
BENE - Maine Excluded Services	0254T	evasc rpr ilac art bifur endgrft cathj rs&i uni	1/1/2011	12/31/2078
BENE - Maine Excluded Services	0255T	evasc iliac art bifurc w/endoprosth uni rs&i	1/1/2011	12/31/2078
BENE - Maine Excluded Services	0263T	auto bone marrw cell rx complt bone marrw harvst	7/1/2011	12/31/2078
BENE - Maine Excluded Services	0264T	auto bone marrw cell rx comp w/o bone mar harvst	7/1/2011	12/31/2078
BENE - Maine Excluded Services	0265T	bone mar harvst only for intmusc autolo cell rx	7/1/2011	12/31/2078
BENE - Maine Excluded Services	0266T	im/repl cartd sinus baroreflx activ dev tot syst	7/1/2011	12/31/2078
BENE - Maine Excluded Services	0267T	im/repl cartd sins baroreflx activ dev lead only	7/1/2011	12/31/2078
BENE - Maine Excluded Services	0268T	im/repl cartd sins barreflx act dev pls gen only	7/1/2011	12/31/2078
BENE - Maine Excluded Services	0269T	rev/remvl cartd sins barreflx act dev tot system	7/1/2011	12/31/2078
BENE - Maine Excluded Services	0270T	rev/remvl cartd sins barreflx act dev lead only	7/1/2011	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	0271T	rev/rem cartd sins barreflx act dev pls gen only	7/1/2011	12/31/2078
BENE - Maine Excluded Services	0272T	intrgortion dev eval cartd sins barreflx w/i&r	7/1/2011	12/31/2078
BENE - Maine Excluded Services	0273T	introgation dev eval cartd sins barreflx w/prgrm	7/1/2011	12/31/2078
BENE - Maine Excluded Services	0274T	perc lamino-/laminectomy image guide cerv/thorac	7/1/2011	12/31/2078
BENE - Maine Excluded Services	0275T	perc lamino-/laminectomy indir imag guide lumbar	7/1/2011	12/31/2078
BENE - Maine Excluded Services	0276T	bronchscopy fluoro w/bronchial thermplasty 1 lobe	1/1/2012	12/31/2078
BENE - Maine Excluded Services	0277T	bronchscopy fluoro w/brnchial thermplasty />2lobe	1/1/2012	12/31/2078
BENE - Maine Excluded Services	0278T	trnscut elect modulation pain reproces ea tx sess	1/1/2012	12/31/2078
BENE - Maine Excluded Services	0279T	cell enumrtion w/immun selxn & id fluid specimn	1/1/2012	12/31/2078
BENE - Maine Excluded Services	0280T	cell enumeration w/immun selxn id fluid spec i&r	1/1/2012	12/31/2078
BENE - Maine Excluded Services	0281T	perc transeth closr lt atrial appndge implnt s&i	1/1/2012	12/31/2078
BENE - Maine Excluded Services	0282T	perc/open implnt neurostim electrode subq trial	1/1/2012	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	0283T	perc/open implnt neurostim electrode subq perm	1/1/2012	12/31/2078
BENE - Maine Excluded Services	0284T	rev/remvl pg/elctrodes imagng addn new elctrodes	1/1/2012	12/31/2078
BENE - Maine Excluded Services	0285T	elec anlys implant subq field stim pg reprogramm	1/1/2012	12/31/2078
BENE - Maine Excluded Services	0286T	near infrared spectroscopy studies low ext wounds	1/1/2012	12/31/2078
BENE - Maine Excluded Services	0287T	nearinfrd guidance vasc acs rl time dig visu	1/1/2012	12/31/2078
BENE - Maine Excluded Services	0288T	anscpy w/delvry thermal energy muscle anal canal	1/1/2012	12/31/2078
BENE - Maine Excluded Services	0289T	cornea incisns donor cornea w/lasr kertplsty	1/1/2012	12/31/2078
BENE - Maine Excluded Services	0290T	cornea incisns recipient cornea w/lasr kertplsty	1/1/2012	12/31/2078
BENE - Maine Excluded Services	0291T	intrav optcl chernce tmgrphy w/s&i intl vesl	1/1/2012	12/31/2078
BENE - Maine Excluded Services	0292T	intrav optcal cohnrce tmgrphy w/s&i adl vesl	1/1/2012	12/31/2078
BENE - Maine Excluded Services	0293T	ins lt atrl hemodyn motr cmplete syst w/s&i	1/1/2012	12/31/2078
BENE - Maine Excluded Services	0294T	ins lt atrl hemdyn mtr prsr sensr lead w/s&i	1/1/2012	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	0295T	ext ecg > 48hr to 21 day rcrd scan anlys rep r&i	1/1/2012	12/31/2078
BENE - Maine Excluded Services	0296T	ext ecg > 48hr to 21 day rcrd w/conect intl rcrd	1/1/2012	12/31/2018
BENE - Maine Excluded Services	0297T	ext ecg > 48hr to 21 day scan analysis w/report	1/1/2012	12/31/2016
BENE - Maine Excluded Services	0298T	ext ecg > 48hr to 21 day review and interpretatn	1/1/2012	3/31/2017
BENE - Maine Excluded Services	0299T	esw hi energy w/topcal app &dresng care 1st wnd	1/1/2012	12/31/2078
BENE - Maine Excluded Services	0300T	esw hi energy w/topcal app &dresng care adl wnd	1/1/2012	12/31/2078
BENE - Maine Excluded Services	0301T	dest/reduc malig brst tumr w/us thrmorx guidance	1/1/2012	12/31/2078
BENE - Maine Excluded Services	0347T	place interstitial device(s) in bone for rsa	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0348T	radiostereometric analysis spine exam	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0349T	radiostereometric analysis upper extremity exam	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0350T	radiostereometric analysis lower extremity exam	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0351T	intraop oct breast or axill node each specimen	1/1/2015	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	0352T	oct breast or axill node specimen i&r	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0353T	oct of breast surg cavity real time intraop	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0354T	oct breast surg cavity real time/referred i&r	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0355T	gi tract imaging intraluminal colon with i&r	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0356T	insert drug implant into lacrimal canal for iop	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0357T	cryopreservation immature oocyte(s)	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0358T	bia whole body composition assessment w/i&r	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0359T	behavioral identification assessment	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0360T	observational behav assessment first 30 min	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0361T	observational behav assessment addl 30 min	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0362T	behavior id support assmt ea 15 min tech time	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0363T	exposure behav assessment addl 30 min	1/1/2015	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	0364T	adaptive behavior tx by protocol first 30 min	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0365T	adaptive behavior tx by protocol addl 30 min	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0366T	group behavior treatment first 30 min	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0367T	group behavior treatment addl 30 min	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0368T	behavior tx with modification first 30 min	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0369T	behavior treatment with modification addl 30 min	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0370T	family behavior treatment guidance	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0371T	multiple family group behav treatment guidance	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0372T	behavior treatment social skills training group	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0373T	adapt bhv tx prtcl modificaj ea 15 min tech time	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0374T	exposure behavior treatment addl 30 min	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0375T	total disc arthrp ant appr w/dissectomy crv 3+	1/1/2015	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	0376T	ant segment insert drain w/o reservoir ea addl	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0377T	anoscopy w/bulking agent inj for fecal incont	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0378T	visual field assessment phys review and report	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0379T	visual field assessment tech support w/instruct	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0380T	comp animation retina image time series analysis	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0381T	xtrnl hrt rate epi seiz up to 14 days complete	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0382T	xtrnl hrt rate epi seiz up to 14 days r&i only	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0383T	xtrnl hrt rate epi seiz 15 to 30 days complete	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0384T	xtrnl hrt rate epi seiz 15 to 30 days r&i only	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0385T	xtrnl hrt rate epi seiz over 30 days complete	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0386T	xtrnl hrt rate epi seiz over 30 days r&i only	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0387T	transcath insert or replace leadless pm ventr	1/1/2015	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	0388T	transcath removal leadless pm ventricular	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0389T	prog device eval in person leadless pm system	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0390T	peri-proc device eval in pers leadless pm system	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0391T	interrog device eval in person leadless pm syst	1/1/2015	12/31/2078
BENE - Maine Excluded Services	0500F	initial prenatal care visit	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0501F	prenatal flow sheet	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0502F	subsequent prenatal care visit	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0503F	postpartum care visit	1/1/2006	12/31/2078
BENE - Maine Excluded Services	0505F	hemodialysis plan of care documented	1/1/2008	12/31/2078
BENE - Maine Excluded Services	0507F	peritoneal dialysis plan documented	1/1/2008	12/31/2078
BENE - Maine Excluded Services	0514F	plan/care incrsd hgb lvl docd pt on esa thxpy	1/1/2008	12/31/2078
BENE - Maine Excluded Services	0516F	anemia plan of care documented	1/1/2008	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	0519F	planned chemo regimen docd prior start new tx	1/1/2008	12/31/2078
BENE - Maine Excluded Services	0525F	initial visit for episode	4/1/2008	12/31/2078
BENE - Maine Excluded Services	0535F	dyspnea management plan documented	1/1/2009	12/31/2078
BENE - Maine Excluded Services	0545F	plan for follow-up care for mdd docd	1/1/2010	12/31/2078
BENE - Maine Excluded Services	0550F	cytopath report on nongyn specimen 2 wkng days	7/1/2011	12/31/2078
BENE - Maine Excluded Services	0551F	cytopath report nongyn spcmn docd non-routine	7/1/2011	12/31/2078
BENE - Maine Excluded Services	0555F	symptom management plan of care documented	1/1/2012	12/31/2078
BENE - Maine Excluded Services	0556F	plan of care to achieve lipid control documented	1/1/2012	12/31/2078
BENE - Maine Excluded Services	0557F	plan of care to manage anginal symptoms docd	1/1/2012	12/31/2078
BENE - Maine Excluded Services	1000F	tobacco use assessed	1/1/2006	12/31/2078
BENE - Maine Excluded Services	1002F	anginal symptoms & level activity assessed	1/1/2006	12/31/2078
BENE - Maine Excluded Services	1003F	level activity assessed	1/1/2006	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	1004F	clinical symptoms vol overload assessed	1/1/2006	12/31/2078
BENE - Maine Excluded Services	1005F	asthma symptoms evaluated	1/1/2006	12/31/2078
BENE - Maine Excluded Services	1008F	gi&renal prescribed/otc nsaid risk factors asses	1/1/2006	12/31/2078
BENE - Maine Excluded Services	1015F	copd symptoms assessed/tool completed	1/1/2007	12/31/2078
BENE - Maine Excluded Services	1018F	dyspnea assessed not present	1/1/2007	12/31/2078
BENE - Maine Excluded Services	1019F	dyspnea assessed present	1/1/2007	12/31/2078
BENE - Maine Excluded Services	1022F	pneumococcus immunization status assessed	1/1/2007	12/31/2078
BENE - Maine Excluded Services	1026F	co-morbid conditions assessed	1/1/2007	12/31/2078
BENE - Maine Excluded Services	1030F	influenza immunization status assessed	1/1/2007	12/31/2078
BENE - Maine Excluded Services	1032F	current smoker/exposed to secondhand smoke	1/1/2012	12/31/2078
BENE - Maine Excluded Services	1034F	current tobacco smoker	1/1/2007	12/31/2078
BENE - Maine Excluded Services	1035F	current smokeless tobacco user	1/1/2007	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	1038F	persistent asthma mild moderate or severe asthma	1/1/2007	12/31/2078
BENE - Maine Excluded Services	1050F	history new or changing moles	1/1/2008	12/31/2078
BENE - Maine Excluded Services	1052F	type anatomic location and activity all assessed	1/1/2012	12/31/2078
BENE - Maine Excluded Services	1055F	visual functional status assessed	1/1/2008	12/31/2078
BENE - Maine Excluded Services	1060F	doc perm/persistent/paroxysmal atrial fib	1/1/2009	12/31/2078
BENE - Maine Excluded Services	1061F	doc absence perm&persistent&paroxysm atrial fib	7/1/2007	12/31/2078
BENE - Maine Excluded Services	1065F	ischemic stroke symp onset <3 hrs prior arrival	7/1/2007	12/31/2078
BENE - Maine Excluded Services	1066F	ischemic stroke symp onSET >=3 hrs prior arriva	7/1/2007	12/31/2078
BENE - Maine Excluded Services	1070F	alarm symptoms assessed none present	7/1/2007	12/31/2078
BENE - Maine Excluded Services	1071F	alarm symptoms assessed 1/> present	7/1/2007	12/31/2078
BENE - Maine Excluded Services	1100F	pt falls assess docd 2/> falls/fall w/injury/yr	7/1/2007	12/31/2078
BENE - Maine Excluded Services	1110F	pt discharge inpt facility within last 60 days	7/1/2007	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	1116F	auricular/periauricular pain assessed	10/1/2007	12/31/2078
BENE - Maine Excluded Services	1118F	gerd symptoms assessed after 12 months therapy	1/1/2008	12/31/2078
BENE - Maine Excluded Services	1119F	initial evaluation for condition	1/1/2008	12/31/2078
BENE - Maine Excluded Services	1121F	subsequent evaluation condition	1/1/2008	12/31/2078
BENE - Maine Excluded Services	1134F	episode back pain lasting six weeks/<	4/1/2008	12/31/2078
BENE - Maine Excluded Services	1135F	episode back pain lasting > six weeks	4/1/2008	12/31/2078
BENE - Maine Excluded Services	1136F	episode back pain lasting 12 weeks/<	4/1/2008	12/31/2078
BENE - Maine Excluded Services	1137F	episode back pain lasting > 12 wks	4/1/2008	12/31/2078
BENE - Maine Excluded Services	1150F	doc pt w/substantial risk death within 1 year	1/1/2009	12/31/2078
BENE - Maine Excluded Services	1151F	doc pt w/o substantial risk death within 1 year	1/1/2009	12/31/2078
BENE - Maine Excluded Services	1152F	doc advanced disease dx care goals comfort	1/1/2009	12/31/2078
BENE - Maine Excluded Services	1153F	doc advanced disease dx care goals w/o comfort	1/1/2009	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	1157F	advnc care plan or eqv lgl doc in med rcrd	1/1/2009	12/31/2078
BENE - Maine Excluded Services	1158F	advnc care planning tlk docd in med rcrd	1/1/2009	12/31/2078
BENE - Maine Excluded Services	1159F	medication list documented in medical record	1/1/2009	12/31/2078
BENE - Maine Excluded Services	1160F	rvw all meds by rxng prctionr or clin rph docd	1/1/2009	12/31/2078
BENE - Maine Excluded Services	1180F	thromboembolic risk assessed	10/1/2008	12/31/2078
BENE - Maine Excluded Services	1182F	neuropsychiatric symptoms one or more present	1/1/2012	12/31/2078
BENE - Maine Excluded Services	1183F	neuropsychiatric symptoms absent	1/1/2012	12/31/2078
BENE - Maine Excluded Services	1450F	symptoms improved/consist w/txmnt goal assessmnt	1/1/2012	12/31/2078
BENE - Maine Excluded Services	1451F	symptoms show clin imprtnt drop since assessment	1/1/2012	12/31/2078
BENE - Maine Excluded Services	1460F	qualifying card event/diagnosis prior 12 months	1/1/2012	12/31/2078
BENE - Maine Excluded Services	1461F	no qual card event/diag in previous 12 months	1/1/2012	12/31/2078
BENE - Maine Excluded Services	15775	punch graft hair transplant 1-15 punch grafts	1/1/1979	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	15776	punch graft hair transplant >15 punch grafts	1/1/1979	9/15/2019
BENE - Maine Excluded Services	15824	rhytidectomy forehead	1/1/1979	9/15/2019
BENE - Maine Excluded Services	15825	rhytidectomy neck w/platysmal tightening	1/1/1979	9/15/2019
BENE - Maine Excluded Services	15826	rhytidectomy glabellar frown lines	1/1/1979	9/15/2019
BENE - Maine Excluded Services	15828	rhytidectomy cheek chin&neck	1/1/1979	9/15/2019
BENE - Maine Excluded Services	15829	rhytidectomy smas flap	1/1/1979	9/15/2019
BENE - Maine Excluded Services	15842	grf facial nrv palyss fr muscle flap microsurg	1/1/1979	12/31/2078
BENE - Maine Excluded Services	15860	iv injection test vascular flow flap/graft	1/1/1979	12/31/2078
BENE - Maine Excluded Services	17380	electrolysis epilation each 30 minutes	1/1/1979	9/15/2019
BENE - Maine Excluded Services	19105	ablty cryosurgical w/us gid ea fibroadenoma	1/1/2007	12/31/2078
BENE - Maine Excluded Services	2001F	weight recorded	1/1/2008	12/31/2078
BENE - Maine Excluded Services	2002F	clinical signs volume overload assessed	1/1/2006	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	2004F	initial examination involved joints	1/1/2006	12/31/2078
BENE - Maine Excluded Services	2014F	mental status assessed	1/1/2008	12/31/2078
BENE - Maine Excluded Services	2018F	hydration status assessed	1/1/2007	12/31/2078
BENE - Maine Excluded Services	2020F	dilated fundus evaluation performed	1/1/2009	12/31/2078
BENE - Maine Excluded Services	2029F	complete physical skin exam performed	1/1/2008	12/31/2078
BENE - Maine Excluded Services	2030F	hydration status docd normally hydrated	1/1/2008	12/31/2078
BENE - Maine Excluded Services	2031F	hydration status documented dehydrated	1/1/2008	12/31/2078
BENE - Maine Excluded Services	2035F	tympanic membrane mobility assess	10/1/2007	12/31/2078
BENE - Maine Excluded Services	2044F	doc mntl hlth asses prior intvtn back pain 6wks	4/1/2008	12/31/2078
BENE - Maine Excluded Services	2050F	wound characteristics docd prior debridement	1/1/2010	12/31/2078
BENE - Maine Excluded Services	2060F	pt intrvwd by eval clinician < /date diag mdd	1/1/2010	12/31/2078
BENE - Maine Excluded Services	20985	cptr-asst surgical navigation image-less	1/1/2008	6/30/2020

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	21073	manipulation tmj therapeutic require anesthesia	1/1/2008	12/31/2078
BENE - Maine Excluded Services	21139	rdctj fhd cntrg&setback ant frontal sinus wall	1/1/1991	12/31/2078
BENE - Maine Excluded Services	21245	rcnstj mndbl/maxl subpriosteal implant partial	1/1/1988	12/31/2078
BENE - Maine Excluded Services	21246	rcnstj mndbl/maxl subpriosteal implant complete	1/1/1988	12/31/2078
BENE - Maine Excluded Services	21248	rcnstj mandible/maxl endosteal implant partial	1/1/1988	12/31/2078
BENE - Maine Excluded Services	21249	rcnstj mandible/maxl endosteal implant complete	1/1/1988	12/31/2078
BENE - Maine Excluded Services	21742	repair pectus excavatm/carinatm minly w/o thrsc	1/1/2003	6/30/2018
BENE - Maine Excluded Services	21743	repair pectus excavatm/carinatm minly w/thrsc	1/1/2003	12/31/2017
BENE - Maine Excluded Services	22526	perq intrdscl electrothrm annuloplasty 1 level	9/1/2010	12/31/2078
BENE - Maine Excluded Services	22527	perq intrdscl electrothrm annuloplasty addl lvl	9/1/2010	12/31/2078
BENE - Maine Excluded Services	29700	removal/bivalving gauntlet boot/body cast	1/1/1979	12/31/2078
BENE - Maine Excluded Services	29705	removal/bivalving full arm/full leg cast	1/1/1979	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	29710	rmvl/bivalv sho/hip spica minerva/risser jacket	1/1/1979	12/31/2078
BENE - Maine Excluded Services	29715	removal/bivalving turnbuckle jacket	1/1/1979	12/31/2014
BENE - Maine Excluded Services	3006F	chest x-ray results documented & reviewed	1/1/2007	12/31/2078
BENE - Maine Excluded Services	3008F	body mass index documented	1/1/2010	12/31/2078
BENE - Maine Excluded Services	3011F	lipid panel results documented & reviewed	1/1/2007	12/31/2078
BENE - Maine Excluded Services	3015F	cervical cancer screening results docd & rvwd	1/1/2010	12/31/2078
BENE - Maine Excluded Services	3018F	pre-prx risk assess depth&qual bowel prep	1/1/2009	12/31/2078
BENE - Maine Excluded Services	3019F	lvef assessment planned post discharge	1/1/2012	12/31/2078
BENE - Maine Excluded Services	3020F	left ventricular function assessment documented	1/1/2007	12/31/2078
BENE - Maine Excluded Services	3025F	spirometry test results fev/fvc <70% w/copd	1/1/2007	12/31/2078
BENE - Maine Excluded Services	3027F	spirometry test results fev/fvc >=70% w/o copd	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3028F	oxygen saturation results documented & reviewe	1/1/2007	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	3035F	oxygen satur < /equal 88%/pao2 < /equal 55 mm	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3037F	oxygen saturation > 88%/pao2> 55 mm hg	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3040F	functional expiratory volume < 40%	1/1/2007	12/31/2078
BENE - Maine Excluded Services	3042F	functjl expir volume >/equal 40% predicted value	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3055F	lvef less than or equal to 35%	1/1/2012	12/31/2078
BENE - Maine Excluded Services	3056F	lvef greater than 35%	1/1/2012	12/31/2078
BENE - Maine Excluded Services	3073F	documented length corneal power & lens power	1/1/2009	12/31/2078
BENE - Maine Excluded Services	3074F	most recent systolic blood pressure <130 mm hg	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3075F	most recent systolic blood press 130-139mm hg	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3077F	most recent systolic blood pres>/equal 140 mm hg	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3078F	most recent diastolic blood pressure < 80 mm hg	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3079F	most recent diastolic blood pressure 80-89 mm hg	1/1/2008	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	3080F	most recent diastol blood pres \geq 90 mm hg	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3082F	kt/v < 1.2 (clearance of urea (kt)/volume (v))	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3083F	kt/v equal > 1.2 & < 1.7	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3084F	kt/v \geq 1.7	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3085F	suicide risk assessed	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3088F	major depressive disorder mild	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3089F	major depressive disorder moderate	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3090F	mdd severe without psychotic features	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3091F	major despresv disorder severe w/psychot feature	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3093F	doc new diag dx init/recurrent episode of mdd	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3110F	ct/mri hmrhg/mass lesion/acute infrc doc	7/1/2007	12/31/2078
BENE - Maine Excluded Services	3111F	ct or mri brain done w/in 24 hrs hosp arrival	7/1/2007	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	3112F	ct/mri brain done 24 hrs after hosp arrival	1/1/2009	12/31/2078
BENE - Maine Excluded Services	3115F	quant results eval curr level activity clin symp	1/1/2012	12/31/2078
BENE - Maine Excluded Services	3117F	hf disease specific assessment tool completed	1/1/2012	12/31/2078
BENE - Maine Excluded Services	3118F	new york heart association (nyha) class docd	1/1/2012	12/31/2078
BENE - Maine Excluded Services	3119F	no eval level of activity or clinical symptoms	1/1/2012	12/31/2078
BENE - Maine Excluded Services	3126F	esoph bx rppt w/dysplas info and approp grading	1/1/2015	12/31/2078
BENE - Maine Excluded Services	31295	nasal/sinus ndsc surg w/dilation maxillary sinus	1/1/2011	3/31/2016
BENE - Maine Excluded Services	31296	nasal/sinus ndsc surg w/dilation frontal sinus	1/1/2011	3/31/2016
BENE - Maine Excluded Services	31297	nasal/sinus ndsc surg w/dilation sphenoid sinus	1/1/2011	3/31/2016
BENE - Maine Excluded Services	3130F	upper gi endoscopy performed	7/1/2007	12/31/2078
BENE - Maine Excluded Services	3132F	doc referal for upper gi endoscopy	1/1/2009	12/31/2078
BENE - Maine Excluded Services	3140F	upper gi endo report shows poss barrett's esoph	7/1/2007	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	3141F	upper gi endo report show no suspect barrett's	7/1/2007	12/31/2078
BENE - Maine Excluded Services	3142F	barium swallow test ordered	7/1/2007	12/31/2078
BENE - Maine Excluded Services	3150F	forceps esophageal biopsy performed	7/1/2007	12/31/2078
BENE - Maine Excluded Services	3200F	barium swallow test not ordered	7/1/2007	12/31/2078
BENE - Maine Excluded Services	3230F	hearing test 6 mos prior to ear tube insertion	10/1/2007	12/31/2078
BENE - Maine Excluded Services	3268F	psa & tumor stage&gleason score prior init	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3271F	low risk of recurrence prostate cancer	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3278F	serum levels calcum phosph parathyr & lipid pr	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3279F	hemoglobin level >=equal 13 g/dl	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3280F	hemoglobin level 11 g/dl-12.9 g/dl	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3281F	hemoglobin level < 11 g/dl	1/1/2008	12/31/2078
BENE - Maine Excluded Services	32850	donor pneumonectomy from cadaver donor	1/1/1994	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	32855	bkbench prepj cadaver donor lung allograft uni	1/1/2005	12/31/2078
BENE - Maine Excluded Services	32856	bkbench prepj cadaver donor lung allograft bi	1/1/2005	12/31/2078
BENE - Maine Excluded Services	3285F	iop reduced < 15% pre-intervention level	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3290F	patient is d (rh) negative and unsensitized	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3291F	patient is d (rh) positive or sensitized	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3292F	hiv tstng ask/docd/rvwd at 1st/2nd prenatal vst	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3293F	abo and rh blood typing documented as performed	1/1/2010	12/31/2078
BENE - Maine Excluded Services	3294F	gbs scrning docd done during wk 35-37 gestation	1/1/2010	12/31/2078
BENE - Maine Excluded Services	3315F	estrogen/progest receptor positive breast cancer	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3317F	path reprt malignancy docd & rvwd initiate che	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3318F	path reprt malignancy docd & rvwd initia rad	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3321F	ajcc cancer stage 0 or ia melanoma	10/1/2008	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	3322F	melanoma than ajcc stage 0	10/1/2008	12/31/2078
BENE - Maine Excluded Services	3324F	mri ct scan ordered reviewed/requested	1/1/2010	12/31/2078
BENE - Maine Excluded Services	3325F	preop asses 12 mos prior cataract surg w/io lens	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3330F	imaging study ordered	4/1/2008	12/31/2078
BENE - Maine Excluded Services	3331F	imaging study not ordered	4/1/2008	12/31/2078
BENE - Maine Excluded Services	3351F	neg dep symp cat using stand dep assess tool	7/1/2008	12/31/2078
BENE - Maine Excluded Services	3352F	no signif dep symp cat by stand dep assess tool	7/1/2008	12/31/2078
BENE - Maine Excluded Services	3353F	mild to mod dep symp by stand dep assess tool	7/1/2008	12/31/2078
BENE - Maine Excluded Services	3354F	clin sign dep symp by stand dep assess tool	7/1/2008	12/31/2078
BENE - Maine Excluded Services	3374F	ajcc breast cancer stage i t1c	10/1/2008	12/31/2078
BENE - Maine Excluded Services	3376F	ajcc breast cancer stage ii	10/1/2008	12/31/2078
BENE - Maine Excluded Services	3378F	ajcc breast cancer stage iii	10/1/2008	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	33880	evasc rpr dta coverage art origin 1st endoprosth	1/1/2006	11/30/2016
BENE - Maine Excluded Services	3388F	ajcc colon cancer stage iii docd	1/1/2010	12/31/2078
BENE - Maine Excluded Services	33930	donor cardiectomy-pneumonectomy	1/1/1979	12/31/2078
BENE - Maine Excluded Services	33933	bkbench prepj cadaver donor heart/lung allograft	1/1/2005	12/31/2078
BENE - Maine Excluded Services	33940	donor cardiectomy	1/1/1979	12/31/2078
BENE - Maine Excluded Services	33944	bkbench prepj cadaver donor heart allograft	1/1/2005	12/31/2078
BENE - Maine Excluded Services	33980	rmvl ventr assist dev impltable icorp 1 vntrc	1/1/2002	7/10/2017
BENE - Maine Excluded Services	3450F	dyspnea scrnd no-mild dyspnea	1/1/2009	12/31/2078
BENE - Maine Excluded Services	3451F	dyspnea scrnd mod-severe dyspnea	1/1/2009	12/31/2078
BENE - Maine Excluded Services	3452F	dyspnea not screened	1/1/2009	12/31/2078
BENE - Maine Excluded Services	34806	tcat placement physiologic sensor aneurysmal sac	1/1/2008	12/31/2078
BENE - Maine Excluded Services	3490F	history of aids-defining condition	1/1/2009	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	3491F	hiv indeterminate infants born of hiv mothers	1/1/2009	12/31/2078
BENE - Maine Excluded Services	3492F	history of nadir cd4+ cell count <350 cells/mm3	1/1/2009	12/31/2078
BENE - Maine Excluded Services	3497F	cd4+ cell percentage <15% hiv	1/1/2009	12/31/2078
BENE - Maine Excluded Services	3498F	cd4+ cell percentage >= 15% hiv	1/1/2009	12/31/2078
BENE - Maine Excluded Services	3513F	hepatitis b screening documented as performed	10/1/2008	12/31/2078
BENE - Maine Excluded Services	3514F	hepatitis c screening documented as performed	10/1/2008	12/31/2078
BENE - Maine Excluded Services	3515F	patient has documented immunity to hepatitis c	10/1/2008	12/31/2078
BENE - Maine Excluded Services	3520F	clostridium difficile testing performed	1/1/2012	12/31/2078
BENE - Maine Excluded Services	3550F	low risk for thromboembolism	10/1/2008	12/31/2078
BENE - Maine Excluded Services	3551F	intermediate risk for thromboembolism	10/1/2008	12/31/2078
BENE - Maine Excluded Services	3552F	high risk for thromboembolism	10/1/2008	12/31/2078
BENE - Maine Excluded Services	3555F	pt had inr measurement performed	10/1/2008	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	3572F	pt potential risk fracture weight-bearing site	10/1/2008	12/31/2078
BENE - Maine Excluded Services	3573F	pt not potent risk fracture weight-bearing site	10/1/2008	12/31/2078
BENE - Maine Excluded Services	3650F	electroencephalogram ordered rvwd or req	1/1/2010	12/31/2078
BENE - Maine Excluded Services	37501	unlisted vascular endoscopy procedure	1/1/2003	12/31/2078
BENE - Maine Excluded Services	3775F	adenoma(s)/neoplasm detected scrng clnscpy	1/1/2015	12/31/2078
BENE - Maine Excluded Services	3776F	adenoma(s)/neoplasm not detected scrng clnscpy	1/1/2015	12/31/2078
BENE - Maine Excluded Services	38204	mgmt rcp hematop progenitor cell donor &acquisj	1/1/2003	12/31/2078
BENE - Maine Excluded Services	38207	trnspl prepj hematop progen cells cryoprsv stor	1/1/2003	12/31/2018
BENE - Maine Excluded Services	38208	trnspl prep hematop progen thaw prev hrv per dnr	1/1/2003	12/31/2018
BENE - Maine Excluded Services	38209	trnspl prep hmatop prog thaw prev hrv wsh per dnr	1/1/2003	12/31/2078
BENE - Maine Excluded Services	38210	trnspl prepj hematop progen deplj in hrv t-cell	1/1/2003	9/21/2017
BENE - Maine Excluded Services	38210	trnspl prepj hematop progen deplj in hrv t-cell	9/24/2017	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	38211	trnspl prepj hematop progen tum cell deplj	1/1/2003	12/31/2078
BENE - Maine Excluded Services	38212	trnspl prepj hematop progen red bld cell rmvl	1/1/2003	12/31/2078
BENE - Maine Excluded Services	38213	trnspl prepj hematop progen plttl deplj	1/1/2003	12/31/2078
BENE - Maine Excluded Services	38214	trnspl prepj hematop progen plsm vol deplj	1/1/2003	12/31/2078
BENE - Maine Excluded Services	38215	trnspl prepj hematop progen concentration plsm	1/1/2003	12/31/2078
BENE - Maine Excluded Services	39499	unlisted procedure mediastinum	1/1/1979	12/31/2078
BENE - Maine Excluded Services	39599	unlisted procedure diaphragm	9/1/2010	9/27/2015
BENE - Maine Excluded Services	39599	unlisted procedure diaphragm	9/30/2015	12/31/2078
BENE - Maine Excluded Services	4002F	statin ther prescribed	1/1/2006	12/31/2078
BENE - Maine Excluded Services	4003F	pt education wrttn/oral hrt failure pts pfrmd	1/1/2006	12/31/2078
BENE - Maine Excluded Services	4006F	beta-blker ther prescribed	1/1/2006	12/31/2078
BENE - Maine Excluded Services	4009F	ace/arb inhibitor therapy prescribed	1/1/2008	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	4011F	oral antiplatelet therapy prescribed	1/1/2010	12/31/2078
BENE - Maine Excluded Services	4012F	warfarin therapy prescribed	1/1/2006	12/31/2078
BENE - Maine Excluded Services	4013F	statin therapy rxd/currently taken	1/1/2012	12/31/2078
BENE - Maine Excluded Services	4014F	dschrg instructions hrt failure xcp pts 18 yr	1/1/2006	12/31/2078
BENE - Maine Excluded Services	4015F	prersistent asthma long term ctrl med prescribed	1/1/2006	12/31/2078
BENE - Maine Excluded Services	4016F	anti-inflammatory/analgesic agt prescribed	1/1/2006	12/31/2078
BENE - Maine Excluded Services	4017F	gi prophylaxis nsaid use prescribed	1/1/2006	12/31/2078
BENE - Maine Excluded Services	4018F	therapeutic exercise involved jts inst/prescribe	1/1/2006	12/31/2078
BENE - Maine Excluded Services	4019F	document counseling exercise calcium & vitamin	1/1/2007	12/31/2078
BENE - Maine Excluded Services	4030F	long-term oxygen therapy prescribed	1/1/2007	12/31/2078
BENE - Maine Excluded Services	4033F	pulmonary rehabilitation recommended	1/1/2007	12/31/2078
BENE - Maine Excluded Services	4046F	docd antibio w/in 4 hrs prior/intraop surg incis	7/1/2007	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	4050F	hypertension plan of care documented	1/1/2007	12/31/2078
BENE - Maine Excluded Services	4051F	referred for an arterio-venous (av) fistula	1/1/2008	12/31/2078
BENE - Maine Excluded Services	4052F	hemodial via functiong av fistula	1/1/2007	12/31/2078
BENE - Maine Excluded Services	4053F	hemodialysis via functioning avgraft	1/1/2007	12/31/2078
BENE - Maine Excluded Services	4054F	hemodialysis via catheter	1/1/2007	12/31/2078
BENE - Maine Excluded Services	4055F	patient receiving peritoneal dialysis	1/1/2009	12/31/2078
BENE - Maine Excluded Services	4056F	appropriate oral rehyd solution recommended	1/1/2009	12/31/2078
BENE - Maine Excluded Services	4058F	pag provided to caregiver	1/1/2007	12/31/2078
BENE - Maine Excluded Services	4060F	psychotherapy services provided	1/1/2007	12/31/2078
BENE - Maine Excluded Services	4062F	patient referral for psychotherapy documented	1/1/2007	12/31/2078
BENE - Maine Excluded Services	4063F	antidepressant rxthxy consider & not prescribe	1/1/2010	12/31/2078
BENE - Maine Excluded Services	4064F	antidepressant pharmacotherapy prescribed	1/1/2007	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	4065F	antipsychotic pharmacotherapy prescribed	1/1/2007	12/31/2078
BENE - Maine Excluded Services	4066F	electroconvulsive therapy (ect) provided	1/1/2007	12/31/2078
BENE - Maine Excluded Services	4067F	pt referral electroconvulsive thxpy (ect) docd	1/1/2007	12/31/2078
BENE - Maine Excluded Services	4069F	venous thromboembolism (vte) prophylaxis rcvd	1/1/2012	12/31/2078
BENE - Maine Excluded Services	4073F	oral antiplatelet therapy prescrbed at discharge	7/1/2007	12/31/2078
BENE - Maine Excluded Services	4077F	doc t-pa administration was considered	7/1/2007	12/31/2078
BENE - Maine Excluded Services	4079F	doc rehab services were considered	7/1/2007	12/31/2078
BENE - Maine Excluded Services	4090F	patient receiving erythropoietin therapy	7/1/2007	12/31/2078
BENE - Maine Excluded Services	4133F	antihistamine/decongestant prescribed	10/1/2007	12/31/2078
BENE - Maine Excluded Services	4134F	antihistamine/decongestant not prescribed	10/1/2007	12/31/2078
BENE - Maine Excluded Services	4135F	systemic corticosteroids prescribed	10/1/2007	12/31/2078
BENE - Maine Excluded Services	4136F	systemic corticosteroids not prescribed	10/1/2007	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	4142F	corticosteroid sparing therapy prescribed	1/1/2012	12/31/2078
BENE - Maine Excluded Services	4150F	current hepatitis c antiviral treatment	10/1/2007	12/31/2078
BENE - Maine Excluded Services	41530	submucosal abltj tongue rf 1/> sites pr session	1/1/2009	12/31/2078
BENE - Maine Excluded Services	4155F	hepatitis a vaccine series previously received	10/1/2007	12/31/2078
BENE - Maine Excluded Services	4157F	hepatitis b vaccine series previously received	10/1/2007	12/31/2078
BENE - Maine Excluded Services	4163F	pt counseling treatment options prostate cancer	1/1/2009	12/31/2078
BENE - Maine Excluded Services	4165F	3d-crt or intensity modul rad thxpy recvd	1/1/2008	12/31/2078
BENE - Maine Excluded Services	4167F	head-bed elev 30-45 deg 1st vent day ordered	1/1/2008	12/31/2078
BENE - Maine Excluded Services	4168F	pt rcvg care icu & rcvng mech vent 24 hrs/<	1/1/2008	12/31/2078
BENE - Maine Excluded Services	4169F	pt not rcvg care in icu/not rcvg mechl vent	1/1/2008	12/31/2078
BENE - Maine Excluded Services	4171F	patient receiving (esa) therapy	1/1/2008	12/31/2078
BENE - Maine Excluded Services	4174F	tlk vis fxn & qual life/trxmnt for pt/crgvr	1/1/2008	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	4176F	counsel uv lite protec prev/prog cataract devel	1/1/2008	12/31/2078
BENE - Maine Excluded Services	4178F	anti-d immune globulin rcvd 26-30 wks gestation	1/1/2008	12/31/2078
BENE - Maine Excluded Services	4180F	adjvnt chemo rfrrd rxd/rcvd stage iii colon ca	1/1/2008	12/31/2078
BENE - Maine Excluded Services	4181F	conformal radiation therapy received	1/1/2009	12/31/2078
BENE - Maine Excluded Services	4182F	conformal radiation therapy not received	1/1/2009	12/31/2078
BENE - Maine Excluded Services	4185F	nonstop 12mon thxpy w/ppi or h2 h2ra rcvd	1/1/2008	12/31/2078
BENE - Maine Excluded Services	4186F	no contin 12mon thxpy w/ppi or h2 h2ra rcvd	1/1/2008	12/31/2078
BENE - Maine Excluded Services	4188F	approp ace/arb thxp monit test ordrd/done	1/1/2008	12/31/2078
BENE - Maine Excluded Services	4189F	approp digoxin thxp monit tst ordrd/done	1/1/2009	12/31/2078
BENE - Maine Excluded Services	4190F	approp diuretic thxp monit tst ordrd/done	1/1/2008	12/31/2078
BENE - Maine Excluded Services	4191F	approp anticonvul thxp monit tst ordrd/done	1/1/2008	12/31/2078
BENE - Maine Excluded Services	4195F	pt rcvng 1st biol anti-rheum drug thxpy for ra	1/1/2009	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	4200F	extrnl bm radiothxpy to prost w/wo nodal irrad	1/1/2008	12/31/2078
BENE - Maine Excluded Services	4201F	extrnl bm radiothxpy w/wo nodal irrad as adjv	1/1/2008	12/31/2078
BENE - Maine Excluded Services	4210F	ace/arb medication therapy 6 months/>	1/1/2008	12/31/2078
BENE - Maine Excluded Services	4220F	digoxin medication therapy 6 months/>	1/1/2008	12/31/2078
BENE - Maine Excluded Services	4221F	diuretic medication therapy 6 mos/>	1/1/2008	12/31/2078
BENE - Maine Excluded Services	4230F	anticonvul med therapy 6 mos/>	1/1/2008	12/31/2078
BENE - Maine Excluded Services	4240F	instr ther xrce-dr fllwup pt epsd back pn >12 wk	4/1/2008	12/31/2078
BENE - Maine Excluded Services	4242F	tlk re sprvsd xrce prog to pts back pn >12wks	4/1/2008	12/31/2078
BENE - Maine Excluded Services	4255F	duration gen neur anesth 60 mins/> doc record	1/1/2010	12/31/2078
BENE - Maine Excluded Services	4267F	compression therapy prescribed	1/1/2009	12/31/2078
BENE - Maine Excluded Services	4268F	pt ed re need long term compress thxpy rcvd	1/1/2009	12/31/2078
BENE - Maine Excluded Services	4269F	approp method offloading prescribed	1/1/2009	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	4270F	pt rcvng potent anti r-viral thx 6 mon or more	10/1/2008	12/31/2078
BENE - Maine Excluded Services	4274F	flu immuno admind/previously rcvd	10/1/2008	12/31/2078
BENE - Maine Excluded Services	4275F	hep b vac injection admin/previously rcvd	1/1/2009	12/31/2078
BENE - Maine Excluded Services	4279F	pneumocystis jiroveci pneumonia prophylaxis rxd	1/1/2009	12/31/2078
BENE - Maine Excluded Services	4290F	patient screened for injection drug use	10/1/2008	12/31/2078
BENE - Maine Excluded Services	4293F	pt scrnd hgh-rsk sexual behavior	10/1/2008	12/31/2078
BENE - Maine Excluded Services	4300F	pt rcvng warfarin thxpy nonvalv afib or aflutter	10/1/2008	12/31/2078
BENE - Maine Excluded Services	4301F	pt not rcvng warfarin thxpy nonvalv afib/aflutter	10/1/2008	12/31/2078
BENE - Maine Excluded Services	4305F	pt educ foot care & daily inspcn feet rcvd	1/1/2009	12/31/2078
BENE - Maine Excluded Services	4306F	pt counsel psychosoc&pharm tx opioid addiction	1/1/2009	12/31/2078
BENE - Maine Excluded Services	43206	esophagoscopy transoral w/optical endomicroscopy	1/1/2013	12/31/2078
BENE - Maine Excluded Services	43252	egd flex transoral w/optical endomicroscopy	1/1/2013	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	4330F	epilepsy specific safety counseling to patient	1/1/2010	12/31/2078
BENE - Maine Excluded Services	4350F	counseling provided symp mngmnt palliation	1/1/2012	12/31/2078
BENE - Maine Excluded Services	44132	donor enterectomy open cadaver donor	1/1/2001	12/31/2078
BENE - Maine Excluded Services	44133	donor enterectomy open living donor	1/1/2001	12/31/2078
BENE - Maine Excluded Services	44135	intestinal allotransplantation cadaver donor	1/1/2001	12/31/2078
BENE - Maine Excluded Services	44136	intestinal allotransplantation living donor	1/1/2001	12/31/2078
BENE - Maine Excluded Services	44137	rmvl trnspled intestinal allograft compl	1/1/2005	12/31/2078
BENE - Maine Excluded Services	44238	unlisted laparoscopy px intestine xcp rectum	1/1/2003	3/31/2017
BENE - Maine Excluded Services	44381	ileoscopy stoma w/balloon dilation	1/1/2015	12/31/2078
BENE - Maine Excluded Services	44384	ileoscopy stoma w/plmt of endoscopic stent	1/1/2015	12/31/2078
BENE - Maine Excluded Services	44401	colonoscopy stoma ablation lesion	1/1/2015	12/31/2078
BENE - Maine Excluded Services	44402	colonoscopy stoma w/endoscopic stent plcmt	1/1/2015	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	44403	colonoscopy stoma w/endoscopic mucosal rescj	1/1/2015	12/31/2078
BENE - Maine Excluded Services	44404	colonoscopy stoma w/submucosal injection	1/1/2015	12/31/2078
BENE - Maine Excluded Services	44405	colonoscopy stoma w/balloon dilation	1/1/2015	12/31/2078
BENE - Maine Excluded Services	44406	colonoscopy stoma w/endoscopic ultrasound exam	1/1/2015	12/31/2078
BENE - Maine Excluded Services	44407	colonoscopy stoma w/us gid ndl aspir/bx	1/1/2015	12/31/2078
BENE - Maine Excluded Services	44408	colonoscopy through stoma with decompression	1/1/2015	12/31/2078
BENE - Maine Excluded Services	4450F	self-care education provided to patient	1/1/2012	12/31/2078
BENE - Maine Excluded Services	44705	prepare fecal microbiota for instillation	1/1/2013	12/31/2078
BENE - Maine Excluded Services	4470F	implant cardiovert-defib (icd) counseling prov	1/1/2012	12/31/2078
BENE - Maine Excluded Services	4480F	pt rcvng ace/arb beta blocker tx 3 mons/longer	1/1/2012	12/31/2078
BENE - Maine Excluded Services	4481F	pt rcvng ace/arb and beta blocker < 3 months	1/1/2012	12/31/2078
BENE - Maine Excluded Services	4525F	neuropsychiatric intervention ordered	1/1/2012	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	4526F	neuropsychiatric intervention received	1/1/2012	12/31/2078
BENE - Maine Excluded Services	45346	sigmoidoscopy flx ablation tumor polyp/oth les	1/1/2015	12/31/2078
BENE - Maine Excluded Services	45347	sigmoidoscopy flx placement of endoscopic stent	1/1/2015	12/31/2078
BENE - Maine Excluded Services	45349	sgmdsc flx with endoscopic mucosal resection	1/1/2015	12/31/2078
BENE - Maine Excluded Services	45350	sigmoidoscopy flx with with band ligation(s)	1/1/2015	12/31/2078
BENE - Maine Excluded Services	45388	colonoscopy flx ablation tumor polyp/other les	1/1/2015	12/31/2017
BENE - Maine Excluded Services	45390	colonoscopy flx w/endoscopic mucosal resection	1/1/2015	12/31/2017
BENE - Maine Excluded Services	45393	colonoscopy flexible with decompression	1/1/2015	12/31/2078
BENE - Maine Excluded Services	45398	colonoscopy flexible with band ligation(s)	1/1/2015	12/31/2017
BENE - Maine Excluded Services	46601	anoscopy dx w/hra &chem agnts enhancement	1/1/2015	12/31/2078
BENE - Maine Excluded Services	46607	anoscopy dx w/hra &chem agnts enhancement w/bx	1/1/2015	8/6/2017
BENE - Maine Excluded Services	47133	donor hepatectomy cadaver donor	1/1/1979	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	47143	bkbench prep cadaver donor	1/1/2005	12/31/2078
BENE - Maine Excluded Services	47144	bkbench prepj cadaver whole liver grf i&iv vii	1/1/2005	12/31/2078
BENE - Maine Excluded Services	47145	bkbench prepj cadaver donor whl lvr grf i&v vi	1/1/2005	12/31/2078
BENE - Maine Excluded Services	48160	pancreatectomy w/trnsplj pancreas/islet cells	1/1/1979	5/31/2016
BENE - Maine Excluded Services	48160	pancreatectomy w/trnsplj pancreas/islet cells	6/3/2016	4/4/2017
BENE - Maine Excluded Services	48550	donor pancreatectomy duodenal sgm transplant	1/1/1994	12/31/2078
BENE - Maine Excluded Services	48551	bkbench prepj cadaver donor pancreas allograft	9/1/2010	5/31/2016
BENE - Maine Excluded Services	48551	bkbench prepj cadaver donor pancreas allograft	6/3/2016	12/31/2078
BENE - Maine Excluded Services	5005F	counsel new/changing moles self-examination	1/1/2007	12/31/2078
BENE - Maine Excluded Services	5020F	tx summ rppt commun phys&pt 1 mo complete	1/1/2009	12/31/2078
BENE - Maine Excluded Services	50323	bkbench prepj cadaver donor renal allograft	1/1/2005	12/31/2078
BENE - Maine Excluded Services	50325	bkbench prepj living renal donor allograft	1/1/2005	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	5060F	findngs diag mam to mngng pract 3 days interp	4/1/2008	12/31/2078
BENE - Maine Excluded Services	5062F	doc direct comm diag mammo fndngs-phone/person	4/1/2008	12/31/2078
BENE - Maine Excluded Services	5100F	fx risk ref phys/qhp commj 24 hrs imaging study	1/1/2009	12/31/2078
BENE - Maine Excluded Services	5200F	consid neuro eval approp surg thxpy epil 3yrs	1/1/2010	12/31/2078
BENE - Maine Excluded Services	5250F	asthma discharge plan present	1/1/2012	12/31/2078
BENE - Maine Excluded Services	55706	bx prostate strtctc saturation sampling img gid	1/1/2009	12/31/2078
BENE - Maine Excluded Services	55870	electroejaculation	1/1/1992	12/31/2078
BENE - Maine Excluded Services	55970	intersex surg male female	1/1/1979	3/31/2018
BENE - Maine Excluded Services	55980	intersex surg female male	1/1/1979	3/31/2018
BENE - Maine Excluded Services	57150	irrigation vagina&/appl medicament tx disease	1/1/1979	12/31/2078
BENE - Maine Excluded Services	58321	artificial insemination intra-cervical	1/1/1994	12/31/2078
BENE - Maine Excluded Services	58322	artificial insemination intra-uterine	1/1/1994	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	58323	sperm washing artificial insemination	1/1/1994	12/31/2078
BENE - Maine Excluded Services	58345	transcerv fallopian tube cath w/wo hystosalping	1/1/1993	12/31/2078
BENE - Maine Excluded Services	58750	tubotubal anastomosis	1/1/1979	12/31/2078
BENE - Maine Excluded Services	58970	follicle puncture oocyte retrieval any method	1/1/1989	12/31/2078
BENE - Maine Excluded Services	58974	embryo transfer intrauterine	1/1/1989	12/31/2078
BENE - Maine Excluded Services	58976	gamete zygote/embryo fallopian transfer any meth	1/1/1989	12/31/2078
BENE - Maine Excluded Services	59050	fetal monitoring labor phys written report	1/1/1985	12/31/2078
BENE - Maine Excluded Services	59051	fetal monitr labor phys wrttn reprt interpj only	9/1/2010	12/31/2078
BENE - Maine Excluded Services	6005F	rationale for level of care documented	1/1/2007	12/31/2078
BENE - Maine Excluded Services	6015F	patient ok for per oral intake (food/medication)	7/1/2007	12/31/2078
BENE - Maine Excluded Services	6040F	use approp rad dose rdxn dev/man techs docd	4/1/2008	12/31/2078
BENE - Maine Excluded Services	6070F	patient queried counseled re aed side effects	1/1/2010	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	6100F	verify correct pt site pxd documented	7/1/2011	12/31/2078
BENE - Maine Excluded Services	65767	epikeratoplasty	1/1/1987	12/31/2078
BENE - Maine Excluded Services	67141	proph rta dtchmnt w/o drg 1/> sess crtx dthrm	1/1/1979	8/1/2016
BENE - Maine Excluded Services	68371	harvesting conjuncival allography living donor	1/1/2004	12/31/2078
BENE - Maine Excluded Services	69090	ear piercing	1/1/1979	12/31/2078
BENE - Maine Excluded Services	7020F	mammo assessment cat in database for rate	4/1/2008	12/31/2078
BENE - Maine Excluded Services	74263	ct colonography screening image postprocessing	1/1/2010	12/31/2078
BENE - Maine Excluded Services	76497	unlisted computed tomography procedure	1/1/2003	12/31/2078
BENE - Maine Excluded Services	76498	unlisted magnetic resonance procedure	1/1/2003	12/31/2078
BENE - Maine Excluded Services	76970	us study follow up	1/1/1979	12/31/2078
BENE - Maine Excluded Services	77061	digital breast tomosynthesis unilateral	1/1/2015	12/31/2018
BENE - Maine Excluded Services	77062	digital breast tomosynthesis bilateral	1/1/2015	12/31/2018

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	77063	screening digital breast tomosynthesis bi	1/1/2015	10/31/2016
BENE - Maine Excluded Services	77299	unlis px ther radiol clinical tx planning	1/1/1979	12/31/2078
BENE - Maine Excluded Services	77424	intraop radiaj tx deliver xray single tx session	1/1/2012	12/31/2078
BENE - Maine Excluded Services	77425	intraop radiaj tx deliver electrons sngl tx sess	1/1/2012	12/31/2078
BENE - Maine Excluded Services	77499	unlisted procedure therapeutic radiology tx mgmt	1/1/1979	12/31/2078
BENE - Maine Excluded Services	77790	supervision handling loading radiation source	1/1/1979	12/31/2078
BENE - Maine Excluded Services	78282	gastrointestinal protein loss	1/1/1979	12/31/2078
BENE - Maine Excluded Services	78494	card bl pool gated spect rest wal motn ejct frct	1/1/1999	12/31/2078
BENE - Maine Excluded Services	80101	drug scr qual 1 drug class meth ea drug class	1/1/1993	12/31/2014
BENE - Maine Excluded Services	80104	drug scrn qual mlt class nonchromotographic each	1/1/2011	12/31/2014
BENE - Maine Excluded Services	80163	drug screen quantitative digoxin free	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80165	drug screen quant dipropylacetic acid free	1/1/2015	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	80300	drug screen list a any nmbr non tlc devices	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80301	drug screen list a single drug class method	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80302	drug screen presumptive 1 class method list b	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80303	drug screen prsmptv 1/mult class method tlc	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80304	drug screen prsmptv 1/mult class method	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80320	drug screen quantitative alcohols	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80321	drug screen quant alcohols biomarkers 1 or 2	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80322	drug screen quant alcohols biomarkers 3 or more	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80323	alkaloids not otherwise specified	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80324	drug screen quant amphetamines 1 or 2	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80325	drug screen quant amphetamines 3 or 4	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80326	drug screen quant amphetamines 5 or more	1/1/2015	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	80327	drug screen quant anabolic steroid 1 or 2	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80328	drug screen quant anabolic steroid 3 or more	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80329	drug screen analgesics non-opioid 1 or 2	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80330	drug screen analgesics non-opioid 3-5	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80331	drug screen analgesics non-opioid 6 or more	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80332	antidepressants serotonergic class 1 or 2	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80333	antidepressants serotonergic class 3-5	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80334	antidepressants serotonergic class 6 or more	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80335	antidepressants tricyclic other cyclicals 1 or 2	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80336	antidepressants tricyclic other cyclicals 3-5	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80337	antidepressants tricyclic other cyclicals 6/more	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80338	antidepressants not otherwise specified	1/1/2015	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	80339	antiepileptics not otherwise specified 1-3	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80340	antiepileptics not otherwise specified 4-6	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80341	antiepileptics not otherwise specified 7/more	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80342	antipsychotics not otherwise specified 1-3	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80343	antipsychotics not otherwise specified 4-6	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80344	antipsychotics not otherwise specified 7/more	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80345	drug screening barbiturates	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80346	drug screening benzodiazepines 1-12	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80347	drug screening benzodiazepines 13 or more	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80348	drug screening buprenorphine	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80349	drug screening cannabinoids natural	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80350	drug screening cannabinoids synthetic 1-3	1/1/2015	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	80351	drug screening cannabinoids synthetic 4-6	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80352	drug screening cannabinoids synthetic 7/more	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80353	drug screening cocaine	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80354	drug screening fentanyl	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80355	drug screening gabapentin non-blood	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80356	drug screening heroin metabolite	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80357	drug screening ketamine and norketamine	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80358	drug screening methadone	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80359	drug screening methylenedioxyamphetamines	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80360	drug screening methylphenidate	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80361	drug screening opiates 1 or more	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80362	drug screening opioids and opiate analogs 1 or 2	1/1/2015	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	80363	drug screening opioids and opiate analogs 3 or 4	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80364	drug screening opioids & opiate analogs 5/more	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80365	drug screening oxycodone	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80366	drug screening pregabalin	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80367	drug screening propoxyphene	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80368	drug screening sedative hypnotics	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80369	drug screening skeletal muscle relaxants 1 or 2	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80370	drug screening skel muscle relaxants 3 or more	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80371	drug screening stimulants synthetic	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80372	drug screening tapentadol	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80373	drug screening tramadol	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80374	drug screen stereoisomer analysis 1 drug class	1/1/2015	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	80375	drug/substance definitive qual/quant nos 1-3	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80376	drug/substance definitive qual/quant nos 4-6	1/1/2015	12/31/2078
BENE - Maine Excluded Services	80377	drug/substance definitive qual/quant nos 7/more	1/1/2015	12/31/2078
BENE - Maine Excluded Services	81162	brca1 brca2 gene alys full seq full dup/del alys	1/1/2016	6/30/2016
BENE - Maine Excluded Services	81170	abl1 gene analysis kinase domain variants	1/1/2016	6/30/2016
BENE - Maine Excluded Services	81200	aspa gene analysis common variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81201	apc gene analysis full gene sequence	1/1/2013	6/30/2016
BENE - Maine Excluded Services	81202	apc gene analysis known familial variants	1/1/2013	6/30/2016
BENE - Maine Excluded Services	81203	apc gene analysis duplication/deletion variants	1/1/2013	6/30/2016
BENE - Maine Excluded Services	81205	bckdhh gene analysis common variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81206	bcr/abl1 major breakpnt qualitative/quantitative	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81207	bcr/abl1 minor breakpnt qualitative/quantitative	1/1/2012	6/30/2016

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	81208	bcr/abl1 other breakpnt qualitative/quantitative	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81209	blm gene analysis 2281del6ins7 variant	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81210	braf gene analysis v600 variant(s)	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81211	brca1&brca2 full seq analys/comm dup/del brca	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81212	brca1 brca 2 gen alys 185delag 5385insc 6174delt	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81213	brca1&brca2 anal uncommon dup/del variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81214	brca1 full seq anal&common dup/del variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81215	brca1 gene analysis known familial variant	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81216	brca2 gene analysis full sequence analysis	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81217	brca2 gene analysis known familial variant	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81218	cebpa gene analysis full gene sequence	1/1/2016	6/30/2016
BENE - Maine Excluded Services	81219	calr gene analysis common variants in exon 9	1/1/2016	6/30/2016

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	81221	cftr gene analysis known familial variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81222	cftr gene analysis duplication/deletion variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81223	cftr gene analysis full gene sequence	1/1/2012	3/31/2016
BENE - Maine Excluded Services	81224	cftr gene analysis intron 8 poly-t analysis	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81225	cyp2c19 gene analysis common variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81226	cyp2d6 gene analysis common variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81227	cyp2c9 gene analysis common variants	1/1/2012	12/31/2078
BENE - Maine Excluded Services	81228	cytogenom const microarray copy number variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81229	cytogenom const microarray copy number&snp var	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81235	egfr gene analysis common variants	1/1/2013	6/30/2016
BENE - Maine Excluded Services	81240	f2 gene analysis 20210g >a variant	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81241	f5 coagulation factor v anal leiden variant	1/1/2012	6/30/2016

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	81242	fancc gene analysis common variant	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81243	fmr1 analysis eval to detect abnormal alleles	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81244	fmr1 gene analysis characterization of alleles	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81245	flt3 gene analysis internal tandem dup variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81246	flt3 gene anlys tyrosine kinase domain variants	1/1/2015	6/30/2016
BENE - Maine Excluded Services	81250	g6pc gene analysis common variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81251	gba glucosidase/beta/acid anal comm variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81252	gjb2 gene analysis full gene sequence	1/1/2013	6/30/2016
BENE - Maine Excluded Services	81253	gjb2 gene analysis known familial variants	1/1/2013	6/30/2016
BENE - Maine Excluded Services	81254	gjb6 gene analysis common variants	1/1/2013	6/30/2016
BENE - Maine Excluded Services	81255	hexa gene analysis common variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81256	hfe hemochromatosis gene anal common variants	1/1/2012	6/30/2016

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	81257	hba1/hba2 gene analysis common deletions/variant	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81260	ikbkap gene analysis common variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81261	igh@ rearrange abnormal clonal pop amplified	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81262	igh@ rearrange abnormal clonal pop direct probe	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81263	igh@ variable region somatic mutation analysis	1/1/2012	12/31/2078
BENE - Maine Excluded Services	81264	igk@ gene rearrange detect abnormal clonal pop	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81265	comparative anal str markers patient&comp spec	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81266	comparative anal str markers ea addl specimen	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81267	chimerism w/comp to baseline w/o cell selection	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81268	chimerism w/comp to baseline w/cell selection ea	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81270	jak2 gene analysis p.val617phe variant	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81272	kit gene analysis targeted sequence analysis	1/1/2016	6/30/2016

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	81273	kit gene analysis d816 variant(s)	1/1/2016	6/30/2016
BENE - Maine Excluded Services	81275	kras gene analysis variants in exon 2	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81276	kras gene analysis additional variant(s)	1/1/2016	6/30/2016
BENE - Maine Excluded Services	81280	long qt syndrome full sequence analysis	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81281	long qt syndrome anal known familial sequence	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81282	long qt syndrome gene anal dup/del variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81288	mlh1 gene analysis promoter methylation analysis	1/1/2015	6/30/2016
BENE - Maine Excluded Services	81290	mcoln1 mucolipin1 gene analysis common variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81291	mthfr gene analysis common variants	1/1/2012	8/31/2019
BENE - Maine Excluded Services	81292	mlh1 gene analysis full sequence analysis	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81293	mlh1 gene analysis known familial variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81294	mlh1 gene analysis duplication/deletion variants	1/1/2012	6/30/2016

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	81295	msh2 gene analysis full sequence analysis	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81296	msh2 gene analysis known familial variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81297	msh2 gene analysis duplication/deletion variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81298	msh6 gene analysis full sequence analysis	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81299	msh6 gene analysis known familial variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81300	msh6 gene analysis duplication/deletion varia	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81301	microsatellite instab anal mismatch repair def	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81302	mecp2 gene analysis full sequence	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81303	mecp2 gene analysis known familial variant	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81304	mecp2 gene analysis duplication/deletion variant	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81310	npm1 nucleophosmin gene anal exon 12 variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81311	nras gene analysis variants in exon 2&3	1/1/2016	6/30/2016

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	81313	pca3/klk3 prostate specific antigen ratio	1/1/2015	12/31/2078
BENE - Maine Excluded Services	81314	pdgfra gene analys targeted sequence analys	1/1/2016	6/30/2016
BENE - Maine Excluded Services	81315	pml/raralpha common breakpoints qual/quant	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81316	pml/raralpha single breakpoint qual/quan	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81317	pms2 gene analysis full sequence	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81318	pms2 gene analysis known familial variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81319	pms2 gene analysis duplication/deletion variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81321	pten gene analysis full sequence analysis	1/1/2013	6/30/2016
BENE - Maine Excluded Services	81322	pten gene analysis known familial variant	1/1/2013	6/30/2016
BENE - Maine Excluded Services	81323	pten gene analysis duplication/deletion variant	1/1/2013	6/30/2016
BENE - Maine Excluded Services	81324	pmp22 gene anal duplication/deletion analysis	1/1/2013	6/30/2016
BENE - Maine Excluded Services	81325	pmp22 gene analysis full sequence analysis	1/1/2013	6/30/2016

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	81326	pmp22 gene analysis known familial variant	1/1/2013	6/30/2016
BENE - Maine Excluded Services	81330	smpd1 gene analysis common variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81331	snrpn/ube3a methylation analysis	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81332	serpina1 gene analysis common variants	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81340	trb@ rearrangement anal amplification method	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81341	trb@ rearrangement anal direct probe methodology	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81342	trg@ gene rearrangement analysis	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81350	ugt1a1 gene analysis common variants	1/1/2012	12/31/2078
BENE - Maine Excluded Services	81355	vkorc1 gene analysis common variant(s)	1/1/2012	12/31/2078
BENE - Maine Excluded Services	81370	hla class i&ii low hla-a -b -c -drb1/3/4/5&ddb	1/1/2012	5/15/2016
BENE - Maine Excluded Services	81371	hla i&li low resolution hla-a -b&-drb1	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81372	hla class i typing low resolution complete	1/1/2012	6/30/2016

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	81373	hla class i typing low resolution one locus each	1/1/2012	12/31/2078
BENE - Maine Excluded Services	81374	hla i low resolution one antigen equivalent each	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81375	hla ii low resolution hla-drb1/3/4/5 and -dqb1	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81376	hla class ii typing low resolution one locus ea	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81377	hla ii low resolution one antigen equivalent ea	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81378	hla i&ii high resolution hla-a -b -c and -drb1	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81379	hla class i typing high resolution complete	1/1/2012	5/15/2016
BENE - Maine Excluded Services	81380	hla class i typing high resolution one locus ea	1/1/2012	5/15/2016
BENE - Maine Excluded Services	81381	hla i typing high resolution 1 allele/allele grp	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81382	hla class ii typing high resolution one locus ea	1/1/2012	5/15/2016
BENE - Maine Excluded Services	81383	hla ii high resolution 1 allele/allele group	1/1/2012	5/15/2016
BENE - Maine Excluded Services	81400	molecular pathology procedure level 1	1/1/2012	6/30/2016

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	81401	molecular pathology procedure level 2	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81402	molecular pathology procedure level 3	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81403	molecular pathology procedure level 4	1/1/2012	6/30/2016
BENE - Maine Excluded Services	81410	aortic dysfunction/dilation genomic seq analysis	1/1/2015	12/31/2078
BENE - Maine Excluded Services	81411	aortic dysfunction/dilation dup/del analysis	1/1/2015	12/31/2078
BENE - Maine Excluded Services	81412	ashkenazi jewish assoc dsrdrs gen seq anal 9 gen	1/1/2016	12/31/2078
BENE - Maine Excluded Services	81415	exome sequence analysis	1/1/2015	12/8/2016
BENE - Maine Excluded Services	81416	exome sequence analysis each comparator exome	1/1/2015	12/8/2016
BENE - Maine Excluded Services	81417	exome re-eval of previously obtained exome seq	1/1/2015	12/31/2078
BENE - Maine Excluded Services	81420	fetal chromosomal aneuploidy genomic seq analys	1/1/2015	8/31/2019
BENE - Maine Excluded Services	81425	genome sequence analysis	1/1/2015	12/31/2078
BENE - Maine Excluded Services	81426	genome sequence analysis each comparator genome	1/1/2015	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	81427	genome re-evaluation of prec obtained genome seq	1/1/2015	12/31/2078
BENE - Maine Excluded Services	81430	hearing loss genomic sequence analysis 60 genes	1/1/2015	8/7/2017
BENE - Maine Excluded Services	81431	hearing loss dup/del analysis	1/1/2015	8/7/2017
BENE - Maine Excluded Services	81432	hereditary brst ca-related gen seq analys 10 gen	1/1/2016	12/31/2078
BENE - Maine Excluded Services	81433	hereditary brst ca-related dup/del analysis	1/1/2016	12/31/2078
BENE - Maine Excluded Services	81435	hereditary colon ca dsrdrs gen seq analys 10 gen	1/1/2015	12/31/2078
BENE - Maine Excluded Services	81436	hereditary colon ca dsrdrs dup/del analys 5 gen	1/1/2015	12/31/2078
BENE - Maine Excluded Services	81437	heredtry nurondcrn tum dsrdrs gen seq anal 6 gen	1/1/2016	12/31/2078
BENE - Maine Excluded Services	81438	heredtry nurondcrn tum dsrdrs dup/del analysis	1/1/2016	12/31/2078
BENE - Maine Excluded Services	81442	noonan spectrum disorders gen seq analys 12 gen	1/1/2016	12/31/2078
BENE - Maine Excluded Services	81445	gen seq analys solid organ neoplasm 5-50 gene	1/1/2015	12/31/2078
BENE - Maine Excluded Services	81450	gen seq analys hematolymphoid neo 5-50 gene	1/1/2015	10/31/2019

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	81455	gen seq analys sol org/hemtolmphoid neo 51/> gen	1/1/2015	12/31/2078
BENE - Maine Excluded Services	81470	x-linked intellectual dblt genomic seq analys	1/1/2015	12/31/2018
BENE - Maine Excluded Services	81471	x-linked intellectual dblt dup/del gene analys	1/1/2015	12/31/2018
BENE - Maine Excluded Services	81490	autoimmune rheumatoid arthrts analys 12 biomrks	1/1/2016	12/31/2078
BENE - Maine Excluded Services	81493	cor art disease mrna gene expression 23 genes	1/1/2016	12/31/2078
BENE - Maine Excluded Services	81500	onco (ovarian) biochemical assay two proteins	1/1/2013	12/31/2078
BENE - Maine Excluded Services	81503	onco (ovarian) biochemical assay five proteins	1/1/2013	12/31/2078
BENE - Maine Excluded Services	81506	endocrinology biochemical assay seven anal	1/1/2013	12/31/2078
BENE - Maine Excluded Services	81508	fetal congenital abnor assay two proteins	1/1/2013	12/31/2078
BENE - Maine Excluded Services	81509	fetal congenital abnor assay 3 proteins	1/1/2013	12/31/2078
BENE - Maine Excluded Services	81510	fetal congenital abnor assay three anal	1/1/2013	12/31/2078
BENE - Maine Excluded Services	81511	fetal congenital abnor assay four anal	1/1/2013	12/31/2017

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	81512	fetal congenital abnor assay five anal	1/1/2013	12/31/2078
BENE - Maine Excluded Services	81519	oncology breast mrna gene expression 21 genes	1/1/2015	11/30/2016
BENE - Maine Excluded Services	81599	unlisted multianalyte assay algorithmic analysis	1/1/2013	12/31/2078
BENE - Maine Excluded Services	83006	growth stimulation expressed gene 2	1/1/2015	12/31/2078
BENE - Maine Excluded Services	83037	hgb glycosylated device cleared fda home use	9/1/2010	12/31/2017
BENE - Maine Excluded Services	83987	ph exhaled breath condensate	1/1/2010	12/31/2078
BENE - Maine Excluded Services	84112	eval c/v amniotic fluid protein qual ea specimen	1/1/2011	12/31/2016
BENE - Maine Excluded Services	86077	bld bank phys svcs diffc cross match&/eval rep	1/1/1979	12/31/2078
BENE - Maine Excluded Services	86078	bld bank phys svcs invstgj tfuj rxn reprt	1/1/1979	12/31/2078
BENE - Maine Excluded Services	86079	bld bank phys svcs authj devij standard reprt	1/1/1979	12/31/2078
BENE - Maine Excluded Services	86386	nuclear matrix protein 22 nmp22 qualitative	1/1/2012	12/31/2078
BENE - Maine Excluded Services	86860	antibody elution rbc each elution	1/1/1993	12/31/2017

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	87505	nfct agent dna/rna gastrointestinal pathogen	1/1/2015	12/31/2078
BENE - Maine Excluded Services	87506	iadna-dna/rna gi pthgn multiplex probe tq 6-11	1/1/2015	12/31/2078
BENE - Maine Excluded Services	87507	iadna-dna/rna gi pthgn multiplex probe tq 12-25	1/1/2015	9/30/2018
BENE - Maine Excluded Services	87623	iadna human papillomavirus low-risk types	1/1/2015	12/31/2078
BENE - Maine Excluded Services	87625	iadna human papillomavirus types 16 & 18 only	1/1/2015	3/31/2018
BENE - Maine Excluded Services	87806	iaadiadoo hiv1 antigen w/hiv1 & hiv2 antibodies	1/1/2015	12/31/2078
BENE - Maine Excluded Services	88000	necropsy gross examination only w/o cns	1/1/1979	12/31/2078
BENE - Maine Excluded Services	88005	necropsy gross examination w/brain	1/1/1979	12/31/2078
BENE - Maine Excluded Services	88007	necropsy gross examination w/brain&spinal cord	1/1/1979	12/31/2078
BENE - Maine Excluded Services	88012	necropsy gross examination infant w/brain	1/1/1979	12/31/2078
BENE - Maine Excluded Services	88014	necropsy gross exam stillborn/newborn w/brain	1/1/1979	12/31/2078
BENE - Maine Excluded Services	88016	necropsy gross exam macerated stillborn	1/1/1979	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	88020	necropsy gross & microscopic w/o cns	1/1/1979	12/31/2078
BENE - Maine Excluded Services	88025	necropsy gross & microscopic w/brain	1/1/1979	12/31/2078
BENE - Maine Excluded Services	88027	necropsy gross&mcrscp brain & spinal cord	1/1/1979	12/31/2078
BENE - Maine Excluded Services	88028	necropsy gross & microscopic infant w/brain	1/1/1979	12/31/2078
BENE - Maine Excluded Services	88029	necropsy gross&mcrscp stillborn/newborn brain	1/1/1979	12/31/2078
BENE - Maine Excluded Services	88036	necropsy limited gross&/mcrscp regional	1/1/1979	12/31/2078
BENE - Maine Excluded Services	88037	necropsy limitd gross&/mcrscp single organ	1/1/1979	12/31/2078
BENE - Maine Excluded Services	88040	necropsy forensic examination	1/1/1979	12/31/2078
BENE - Maine Excluded Services	88045	necropsy coroner call	1/1/1979	12/31/2078
BENE - Maine Excluded Services	88099	unlisted necropsy procedure	1/1/1979	12/31/2078
BENE - Maine Excluded Services	88199	unlisted cytopathology procedure	1/1/1979	12/31/2078
BENE - Maine Excluded Services	88240	cryoprsvr frzing&storage cells ea cell line	1/1/1999	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	88241	thawing&expansion frozen cells each aliquot	1/1/1999	12/31/2078
BENE - Maine Excluded Services	88366	in situ hybridization ea multiplex probe stain	1/1/2015	12/31/2078
BENE - Maine Excluded Services	88369	m/phmtrc alys ish quant/semi q mnl per spec each	1/1/2015	12/31/2078
BENE - Maine Excluded Services	88373	m/phmtrc alys ish quant/semi q cptr per spec each	1/1/2015	12/31/2078
BENE - Maine Excluded Services	88374	m/phmtrc alys ish quant/semi q cptr each multiprb	1/1/2015	12/31/2078
BENE - Maine Excluded Services	88375	optical endomicroscopic image interp & report	1/1/2013	12/31/2078
BENE - Maine Excluded Services	88749	unlisted in vivo labortory service	1/1/2011	12/31/2078
BENE - Maine Excluded Services	89240	unlis misc path	1/1/2004	12/31/2078
BENE - Maine Excluded Services	89250	cul oocyte/embryo < 4 days	1/1/1996	12/31/2078
BENE - Maine Excluded Services	89251	cul oocyte/embryo < 4 d co-cult oocyte/embryo	1/1/1998	12/31/2078
BENE - Maine Excluded Services	89253	asstd embryo hatching microtqs any meth	1/1/1998	12/31/2078
BENE - Maine Excluded Services	89254	oocyte id from follicular flu	1/1/1998	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	89255	prepj embryo tr	1/1/1998	12/31/2078
BENE - Maine Excluded Services	89257	sprm id from aspir oth/thn seminal	1/1/1998	12/31/2078
BENE - Maine Excluded Services	89258	cryoprsrv embryo	1/1/1998	12/31/2078
BENE - Maine Excluded Services	89259	cryoprsrv sprm	1/1/1998	12/31/2078
BENE - Maine Excluded Services	89260	sprm isol smpl prep insemination/dx semen alys	1/1/2018	12/31/2078
BENE - Maine Excluded Services	89261	sprm isol cplx prep insemination/dx semen alys	1/1/2018	12/31/2078
BENE - Maine Excluded Services	89264	sprm id from tstis tiss frsh/cryoprsrvd	1/1/1999	12/31/2078
BENE - Maine Excluded Services	89268	insemination oocytes	1/1/2004	12/31/2078
BENE - Maine Excluded Services	89272	extnd cul oocyte/embryo 4-7 days	1/1/2004	12/31/2078
BENE - Maine Excluded Services	89280	asstd fertilization microtq < /equal 10 oocytes	1/1/2004	12/31/2078
BENE - Maine Excluded Services	89281	asstd fertilization microtq > 10 oocytes	1/1/2004	12/31/2078
BENE - Maine Excluded Services	89290	bx oocyte microtq <= 5 embry	1/1/2004	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	89291	bx oocyte microtq > 5 embryo	1/1/2004	12/31/2078
BENE - Maine Excluded Services	89300	semen alys presence&/motility sprm huhner	1/1/2018	12/31/2078
BENE - Maine Excluded Services	89310	semen alys motility&cnt x w/huhner tst	1/1/2018	12/31/2078
BENE - Maine Excluded Services	89320	semen analysis volume count motility different	1/1/1979	12/31/2078
BENE - Maine Excluded Services	89322	semen analysis strict morphologic criteria	1/1/2008	12/31/2078
BENE - Maine Excluded Services	89325	sperm antibodies	1/1/2018	12/31/2078
BENE - Maine Excluded Services	89329	sperm evaluation hamster penetration test	1/1/1987	12/31/2078
BENE - Maine Excluded Services	89330	sperm evaluation cervical mucous penetration	1/1/1979	12/31/2078
BENE - Maine Excluded Services	89331	sperm evaluation retrograde ejaculation urine	1/1/2008	12/31/2078
BENE - Maine Excluded Services	89337	cryopreservation mature oocyte(s)	1/1/2015	12/31/2078
BENE - Maine Excluded Services	89342	storage per year embryo	1/1/2004	12/31/2078
BENE - Maine Excluded Services	89343	storage per year sperm/semen	1/1/2004	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	89344	storage per yr reprdtve tiss tsticular/ovarian	1/1/2004	12/31/2078
BENE - Maine Excluded Services	89346	storage per year oocyte	1/1/2004	12/31/2078
BENE - Maine Excluded Services	89352	thawing cryopreserved embryo	1/1/2004	12/31/2078
BENE - Maine Excluded Services	89353	thawing cryopreserved sperm/semen each aliquot	1/1/2004	12/31/2078
BENE - Maine Excluded Services	89354	thawing cryopreserved testicular/ovarian	1/1/2004	12/31/2078
BENE - Maine Excluded Services	89356	thawing cryopreserved oocytes each aliquot	1/1/2004	12/31/2078
BENE - Maine Excluded Services	89398	unlisted reproductive medicine lab procedure	1/1/2010	12/31/2078
BENE - Maine Excluded Services	90288	botulism immune globulin human intravenous use	1/1/1999	12/31/2078
BENE - Maine Excluded Services	90296	diphtheria antitoxin equine any route	1/1/1999	12/31/2078
BENE - Maine Excluded Services	90393	vaccinia immune globulin human im	1/1/1999	12/31/2078
BENE - Maine Excluded Services	90399	unlisted immune globulin	1/1/1999	12/31/2078
BENE - Maine Excluded Services	90460	im adm thru 18yr any rte 1st/only compt vac/tox	1/1/2011	11/30/2017

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	90461	im adm thru 18yr any rte addl vac/tox compt	1/1/2011	11/30/2017
BENE - Maine Excluded Services	90476	adenovirus vaccine type 4 live oral	1/1/1999	12/31/2078
BENE - Maine Excluded Services	90477	adenovirus vaccine type 7 live for oral	1/1/1999	12/31/2078
BENE - Maine Excluded Services	90625	cholera vaccine adult 1 dose live for oral use	1/1/2016	12/31/2078
BENE - Maine Excluded Services	90630	influenza vacc iiv4 split virus prsrv free id	1/1/2015	12/31/2078
BENE - Maine Excluded Services	90644	hib-mency vacc 4 dose sched 6 wks-18 months im	1/1/2010	12/31/2078
BENE - Maine Excluded Services	90650	2vhpv vaccine 3 dose schedule for im use	1/1/2008	12/31/2078
BENE - Maine Excluded Services	90651	9vhpv vacc 2/3 dose sched im use	1/1/2015	5/31/2015
BENE - Maine Excluded Services	90653	iiv adjuvanted vaccine for intramuscular use	1/1/2013	7/31/2018
BENE - Maine Excluded Services	90654	influenza vacc iiv3 split virus prsrv free id	1/1/2011	12/31/2078
BENE - Maine Excluded Services	90661	cciiiv3 vaccine preservative free 0.5 ml im use	1/1/2008	7/31/2016
BENE - Maine Excluded Services	90662	iiv vaccine preserv free increased ag content im	1/1/2008	7/31/2016

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	90662	iiv vaccine preserv free increased ag content im	1/1/2017	7/31/2018
BENE - Maine Excluded Services	90663	influenza vaccine pandemic formulation h1n1	1/1/2008	6/30/2011
BENE - Maine Excluded Services	90664	laiv vaccine pandemic formula for intranasal use	7/1/2010	12/31/2078
BENE - Maine Excluded Services	90666	influenza vaccine pandemic splt prsrv free im	7/1/2010	12/31/2078
BENE - Maine Excluded Services	90667	iiv vaccine pandemic adjuvant for im use	7/1/2010	12/31/2078
BENE - Maine Excluded Services	90668	iiv vaccine pandemic for intramuscular use	7/1/2010	12/31/2078
BENE - Maine Excluded Services	90693	typhoid vaccine akd subq u.s. military	1/1/1999	12/31/2078
BENE - Maine Excluded Services	90697	dtap-ipv-hib-hepb vaccine intramuscular	1/1/2016	12/31/2078
BENE - Maine Excluded Services	90736	zoster vaccine hzv live for subcutaneous use	1/1/2006	3/31/2018
BENE - Maine Excluded Services	90738	japanese encephalitis vaccine inactivated im	7/1/2008	12/31/2078
BENE - Maine Excluded Services	90739	hepb vaccine adult 2 dose schedule for im use	1/1/2013	10/31/2018
BENE - Maine Excluded Services	90845	psychoanalysis	1/1/1990	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	90865	narcosynthesis psyc dx&ther purposes	1/1/1998	12/31/2078
BENE - Maine Excluded Services	90867	repet tms tx initial w/map/motr threshld/del&m	1/1/2011	12/31/2016
BENE - Maine Excluded Services	90868	therap repetitive tms tx subseq delivery & mng	1/1/2011	12/31/2016
BENE - Maine Excluded Services	90869	repet tms tx subseq motr threshld w/deliv & mn	1/1/2012	12/31/2016
BENE - Maine Excluded Services	90875	indiv psychophys biofeed train w/psytx 30 min	1/1/1997	12/31/2078
BENE - Maine Excluded Services	90876	indiv psychophys biofeed train w/psytx 45 min	1/1/1997	12/31/2078
BENE - Maine Excluded Services	90880	hypnotherapy	1/1/1979	12/31/2078
BENE - Maine Excluded Services	90882	environmental ivntj mgmt purposes psyc pt	1/1/1979	12/31/2078
BENE - Maine Excluded Services	90885	psychiatric eval hospital records dx purposes	1/1/1998	12/31/2078
BENE - Maine Excluded Services	90887	interpj/explnaj results psychiatric exam family	1/1/1979	12/31/2078
BENE - Maine Excluded Services	90889	prep report pt psych status agency/payer	1/1/1979	12/31/2078
BENE - Maine Excluded Services	90901	biofeedback training any modality	1/1/1997	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	90911	biofdbk trng perinl musc anorect/uro sphx w/emg	1/1/1994	12/31/2078
BENE - Maine Excluded Services	90940	hemodialysis access flow study	1/1/2001	12/31/2078
BENE - Maine Excluded Services	92140	provocative tests glaucoma i&r w/o tonography	1/1/1979	12/31/2078
BENE - Maine Excluded Services	92227	remote img dx retinl dis w/als & report uni/b	1/1/2011	12/31/2078
BENE - Maine Excluded Services	92228	remote imaging mgt retinal disease w/i&r uni/b	1/1/2011	12/31/2078
BENE - Maine Excluded Services	92559	audiometric testing groups	1/1/1979	12/31/2078
BENE - Maine Excluded Services	92590	hearing aid examination & selection monaural	1/1/1979	12/31/2078
BENE - Maine Excluded Services	92591	hearing aid examination & selection binaural	1/1/1979	12/31/2078
BENE - Maine Excluded Services	92594	electroacous eval hearing aid monaural	1/1/1979	12/31/2078
BENE - Maine Excluded Services	92595	electroacous eval hearing aid binaural	1/1/1979	12/31/2078
BENE - Maine Excluded Services	92596	ear protector attenuation measurements	1/1/1979	12/31/2078
BENE - Maine Excluded Services	92606	ther svc n-sp-genratj dev prgrmg&modificaj	1/1/2003	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	92611	motion fluor eval swlng funcj c/v rec	1/1/2003	8/31/2010
BENE - Maine Excluded Services	92612	flexible endoscopic eval swallow c/v rec	1/1/2003	1/31/2018
BENE - Maine Excluded Services	92613	flexible endoscopic eval swallow c/v rec i&r	1/1/2003	12/31/2078
BENE - Maine Excluded Services	92614	flexible endoscopic eval laryn sensory c/v rec	1/1/2003	12/31/2078
BENE - Maine Excluded Services	92615	flexible endoscopic eval laryn sens c/v rec i&r	1/1/2003	12/31/2078
BENE - Maine Excluded Services	92616	flexible ndsc eval swlng&laryn sens c/v rec	1/1/2003	12/31/2078
BENE - Maine Excluded Services	92617	flexible ndsc eval swlng&laryn sens c/v i&r	1/1/2003	12/31/2078
BENE - Maine Excluded Services	92626	eval aud funcj cand/po surg implt dev 1st hr	1/1/2006	12/31/2078
BENE - Maine Excluded Services	92627	eval aud funcj cand/po surg implt dev ea addl 15	1/1/2006	12/31/2078
BENE - Maine Excluded Services	92640	analysis w/prgrmg aud brainstem implant pr hr	1/1/2007	12/31/2078
BENE - Maine Excluded Services	92700	unlisted otorhinolaryngological service	1/1/2003	12/31/2078
BENE - Maine Excluded Services	92921	prq trluml coronary angioplasty addl branch	1/1/2013	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	92925	prq trluml coronary angio/atherec addl art/brnch	1/1/2013	12/31/2078
BENE - Maine Excluded Services	92929	prq trluml coronary stent w/angio addl art/brnch	1/1/2013	12/31/2078
BENE - Maine Excluded Services	92934	prq trluml coronary stent/ath/angio addl branch	1/1/2013	12/31/2078
BENE - Maine Excluded Services	92938	prq trluml coronary byp grft revasc addl vessel	1/1/2013	12/31/2078
BENE - Maine Excluded Services	92944	prq trluml coronry chnrc occlus revasc addl vsl	1/1/2013	12/31/2078
BENE - Maine Excluded Services	93745	1st set-up & prgrmg phys/qhp of wearable cvdfb	1/1/2005	12/31/2078
BENE - Maine Excluded Services	93982	implant wireless press sensor study aneurysm sac	1/1/2008	12/31/2078
BENE - Maine Excluded Services	93998	unlisted noninvasive vascular diagnostic study	1/1/2012	12/31/2078
BENE - Maine Excluded Services	94005	home ventilator mgmt care oversight 30 min/>	1/1/2007	12/31/2078
BENE - Maine Excluded Services	94725	memb diffusion cap	1/1/1979	12/31/2011
BENE - Maine Excluded Services	94750	pulmonary compliance study	1/1/1979	12/31/2078
BENE - Maine Excluded Services	94770	carbon dioxide exp gas deter infrared analyzer	1/1/1979	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	94774	pediatric apnea monitor attachment phys i&r	1/1/2007	12/31/2078
BENE - Maine Excluded Services	94775	pediatric apnea monitor attachment	1/1/2007	12/31/2078
BENE - Maine Excluded Services	94776	pediatric apnea monitor analyses computer	1/1/2007	12/31/2078
BENE - Maine Excluded Services	94777	pediatric apnea monitor phys/qhp review	1/1/2007	12/31/2078
BENE - Maine Excluded Services	95800	slp stdy unatnd w/hrt rate/o2 sat/resp/slp time	1/1/2011	12/31/2078
BENE - Maine Excluded Services	95801	slp stdy unatnd w/min hrt rate/o2 sat/resp anal	1/1/2011	12/31/2078
BENE - Maine Excluded Services	95803	actigraphy testing recording analysis i&r	1/1/2009	12/31/2078
BENE - Maine Excluded Services	95943	parasymp & symp nrv funcj hrt rate variability	1/1/2013	12/31/2014
BENE - Maine Excluded Services	96040	medical genetics counseling each 30 minutes	1/1/2007	8/31/2010
BENE - Maine Excluded Services	96103	psychological testing computer w/prof i&r	1/1/2006	12/31/2078
BENE - Maine Excluded Services	96120	neuropsycholog testing computer w/prof i&r	1/1/2006	12/31/2078
BENE - Maine Excluded Services	96125	standardized cognitive performance testing	1/1/2008	6/30/2018

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	96155	hlth&behavior ivntj ea 15 min fam w/o pt	1/1/2002	12/31/2078
BENE - Maine Excluded Services	96549	unlisted chemotherapy procedure	1/1/1979	12/31/2078
BENE - Maine Excluded Services	96902	mcrscp xm hair pluck/clip for cnts/struct abnorm	1/1/1998	12/31/2078
BENE - Maine Excluded Services	96904	whole body integumentary photography	1/1/2007	12/31/2078
BENE - Maine Excluded Services	97005	athletic training evaluation	1/1/2002	12/31/2078
BENE - Maine Excluded Services	97006	athletic training re-evaluation	1/1/2002	12/31/2078
BENE - Maine Excluded Services	97010	application modality 1/> areas hot/cold packs	1/1/1979	12/31/2078
BENE - Maine Excluded Services	97039	unlist modality spec type&time constant attend	1/1/1979	12/31/2078
BENE - Maine Excluded Services	97139	unlisted therapeutic procedure specify	1/1/1979	12/31/2078
BENE - Maine Excluded Services	97545	work hardening/conditioning 1st 2 hr	1/1/1993	12/31/2078
BENE - Maine Excluded Services	97546	work hardening/conditioning each hour	1/1/1993	12/31/2078
BENE - Maine Excluded Services	97799	unlisted physical medicine/rehab service/proc	1/1/1979	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	97804	medical nutrition therapy grp2/ indiv ea 30 mi	1/1/2001	12/31/2078
BENE - Maine Excluded Services	97810	acupuncture 1/> ndles w/o elec stimj init 15 min	1/1/2005	12/31/2078
BENE - Maine Excluded Services	97811	acupuncture 1/> ndls w/o elec stimj ea 15 min	1/1/2005	12/31/2078
BENE - Maine Excluded Services	97813	acupuncture 1/> ndls w/elec stimj 1st 15 min	1/1/2005	12/31/2078
BENE - Maine Excluded Services	97814	acup 1/> ndls w/elec stimj ea 15 min w/re-insj	1/1/2005	12/31/2078
BENE - Maine Excluded Services	98943	chiropractic manippltv tx extraspinal 1/> region	1/1/1997	12/31/2078
BENE - Maine Excluded Services	98960	education&training self-mgmt nonphys 1 pt	1/1/2006	5/31/2017
BENE - Maine Excluded Services	98961	education&training self-mgmt nonphys 2-4 pts	1/1/2006	12/31/2078
BENE - Maine Excluded Services	98962	education&training self-mgmt nonphys 5-8 pts	1/1/2006	12/31/2078
BENE - Maine Excluded Services	98966	nonphysician telephone assessment 5-10 min	1/1/2008	3/17/2020
BENE - Maine Excluded Services	98967	nonphysician telephone assessment 11-20 min	1/1/2008	3/17/2020
BENE - Maine Excluded Services	98968	nonphysician telephone assessment 21-30 min	1/1/2008	3/17/2020

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	98969	nonphysician online assessment and management	1/1/2008	12/31/2078
BENE - Maine Excluded Services	99002	handle/convey/any oth svc device fit phys/qhp	1/1/1979	12/31/2078
BENE - Maine Excluded Services	99026	hospital mandated call service in-hospital ea hr	1/1/2003	12/31/2078
BENE - Maine Excluded Services	99027	hospital mandated call svc out-of-hospital ea hr	1/1/2003	12/31/2078
BENE - Maine Excluded Services	99051	svc prv office reg schedd evn wkend/holiday hrs	1/1/2006	12/31/2078
BENE - Maine Excluded Services	99056	svc typical prv office prv out office request pt	1/1/1979	12/31/2078
BENE - Maine Excluded Services	99071	educational supplies prv by the phys at cost	1/1/1979	12/31/2078
BENE - Maine Excluded Services	99078	phys/qhp education svcs rendered pts grp setting	1/1/1979	12/31/2078
BENE - Maine Excluded Services	99080	spec reports > usual med comunicaj/stand rprtg	1/1/1979	12/31/2078
BENE - Maine Excluded Services	99082	unusual travel	1/1/1979	12/31/2078
BENE - Maine Excluded Services	99090	analysis clinical data stored in computers	1/1/1979	12/31/2078
BENE - Maine Excluded Services	99091	collj & interpj physiol data min 30 min ea 30 d	1/1/2002	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	99100	anesthesia extreme age patient under 1 yr/<	1/1/1979	4/30/2018
BENE - Maine Excluded Services	99116	anes complicj utilization total body hypothermia	1/1/1979	12/31/2078
BENE - Maine Excluded Services	99135	anes complicj utilization controlled hypotension	1/1/1979	12/31/2078
BENE - Maine Excluded Services	99140	anes complicj emergency conditions specify	1/1/1979	2/28/2018
BENE - Maine Excluded Services	99148	mod sedatj diff phys/qhp <5 yrs init 30 min	1/1/2006	12/31/2078
BENE - Maine Excluded Services	99149	moderate sedatj diff phys/qhp 5/>yrs init 30 min	1/1/2006	12/31/2078
BENE - Maine Excluded Services	99150	moderate sedatj diff phys/qhp ea addl 15 min	1/1/2006	12/31/2078
BENE - Maine Excluded Services	99172	visual funct scrng auto semi-auto bi quan determ	1/1/2001	12/31/2078
BENE - Maine Excluded Services	99174	instrument based ocular scr bi w/rmt anal & rpt	1/1/2008	12/31/2014
BENE - Maine Excluded Services	99188	application topical fluoride varnish by phs/qhp	1/1/2015	3/31/2018
BENE - Maine Excluded Services	99288	phys/qhp direction emergency medical systems	1/1/1992	12/31/2078
BENE - Maine Excluded Services	99339	indiv phys supvj home/dom/r-home mo 15-29 min	1/1/2006	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	99340	indiv phys supvj home/dom/r-home mo 30 min/>	1/1/2006	12/31/2078
BENE - Maine Excluded Services	99358	prolng e/m svc before&/after dir pt care 1st hr	1/1/1994	12/31/2018
BENE - Maine Excluded Services	99359	prolng e/m before&/after dir care ea 30 minutes	1/1/1994	12/31/2018
BENE - Maine Excluded Services	99363	anticoagulant mgmt outpatient init 90 days	1/1/2007	12/31/2078
BENE - Maine Excluded Services	99364	anticoagulant mgmt outpatient ea sbsq 90 days	1/1/2007	12/31/2078
BENE - Maine Excluded Services	99366	team conference face-to-face nonphysician	1/1/2008	12/31/2078
BENE - Maine Excluded Services	99368	team conference non-face-to-face nonphysician	1/1/2008	12/31/2078
BENE - Maine Excluded Services	99374	supvj pt home health agency mo 15-29 minutes	1/1/1998	12/31/2078
BENE - Maine Excluded Services	99375	supervision pt home health agency month 30 min/>	1/1/1994	12/31/2078
BENE - Maine Excluded Services	99377	supervision hospice patient/month 15-29 min	1/1/1998	12/31/2078
BENE - Maine Excluded Services	99378	supervision hospice patient/month 30 minutes/>	1/1/1998	12/31/2078
BENE - Maine Excluded Services	99379	supervision nurs facility patient mo 15-29 min	1/1/1998	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	99380	supervision nurs facility patient month 30 min/>	1/1/1998	12/31/2078
BENE - Maine Excluded Services	99429	unlisted preventive medicine service	1/1/1992	12/31/2078
BENE - Maine Excluded Services	99441	phys/qhp telephone evaluation 5-10 min	1/1/2008	3/17/2020
BENE - Maine Excluded Services	99442	phys/qhp telephone evaluation 11-20 min	1/1/2008	3/17/2020
BENE - Maine Excluded Services	99443	phys/qhp telephone evaluation 21-30 min	1/1/2008	3/17/2020
BENE - Maine Excluded Services	99444	phys/qhp online evaluation & management service	1/1/2008	12/31/2078
BENE - Maine Excluded Services	99450	basic life and/or disability examination	1/1/1995	12/31/2078
BENE - Maine Excluded Services	99455	work related/med dblt xm treating phys	1/1/1995	12/31/2078
BENE - Maine Excluded Services	99456	work related/med dblt xm oth/thn treating phys	1/1/1995	12/31/2078
BENE - Maine Excluded Services	99487	cmplx chron care mgmt w/o pt vst 1st hr per mo	1/1/2013	12/31/2078
BENE - Maine Excluded Services	99488	complx chron care coord w/ pt vst 1st hr per mo	1/1/2013	12/31/2014
BENE - Maine Excluded Services	99489	cmplx chron care mgmt ea addl 30 min per month	1/1/2013	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	99495	transitional care manage srvc 14 day discharge	1/1/2013	12/31/2019
BENE - Maine Excluded Services	99496	transitional care manage srvc 7 day discharge	1/1/2013	12/31/2019
BENE - Maine Excluded Services	99500	home visit prenatal monitoring & assessment	1/1/2002	12/31/2078
BENE - Maine Excluded Services	99501	home visit postnatal asmt&f-up care	1/1/2002	12/31/2078
BENE - Maine Excluded Services	99502	home visit newborn care & assessment	1/1/2002	12/31/2078
BENE - Maine Excluded Services	99503	home visit respiratory therapy care	1/1/2002	12/31/2078
BENE - Maine Excluded Services	99504	home visit mechanical ventilation care	1/1/2002	12/31/2078
BENE - Maine Excluded Services	99505	home visit stoma care&maint clst&cstost	1/1/2002	12/31/2078
BENE - Maine Excluded Services	99506	home visit intramuscular injections	1/1/2002	12/31/2078
BENE - Maine Excluded Services	99507	home visit care&maint cath	1/1/2002	12/31/2078
BENE - Maine Excluded Services	99509	home visit assistance daily liv&prsonal care	1/1/2002	12/31/2078
BENE - Maine Excluded Services	99510	home visit indiv fam/marriage counseling	1/1/2002	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	99511	home visit fecal impaction mgmt&enema admn	1/1/2002	12/31/2078
BENE - Maine Excluded Services	99512	home visit hemodialysis	1/1/2002	12/31/2078
BENE - Maine Excluded Services	99600	unlisted home visit service/procedure	1/1/2003	12/31/2078
BENE - Maine Excluded Services	99601	home nfs/specty drug admn pr vst < /2 hr	7/1/2003	4/30/2020
BENE - Maine Excluded Services	99602	home nfs/specty drug admn pr vst < /2 hr ea hr	7/1/2003	4/30/2020
BENE - Maine Excluded Services	99605	medication therapy initial 15 min new patient	1/1/2008	12/31/2078
BENE - Maine Excluded Services	99606	medication therapy initial 15 min established pt	1/1/2008	12/31/2078
BENE - Maine Excluded Services	99607	medication therapy each additional 15 min	1/1/2008	12/31/2078
BENE - Maine Excluded Services	A0120	Non-emergency transport mini-bus, mnt area	1/1/1982	12/31/2078
BENE - Maine Excluded Services	A0140	Non-emergency transport air travel	1/1/1985	12/31/2078
BENE - Maine Excluded Services	A0382	Basic support routine disposable supplies	1/1/1995	12/31/2078
BENE - Maine Excluded Services	A0384	BLS defibrillation disposable supplies	1/1/1995	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	A0392	ALS defibrillation disposable supplies	1/1/1995	12/31/2078
BENE - Maine Excluded Services	A0394	ALS IV drug therapy disposable supplies	1/1/1995	12/31/2078
BENE - Maine Excluded Services	A0396	ALS esophageal intube disposable supplies	1/1/1995	12/31/2078
BENE - Maine Excluded Services	A0398	ALS routine disposable supplies	1/1/1995	12/31/2078
BENE - Maine Excluded Services	A0422	Ambulance O2 and O2 supplies life sustaining	1/1/1995	12/31/2078
BENE - Maine Excluded Services	A0432	PI volunteer ambulance co prohibited third	1/1/2001	12/31/2078
BENE - Maine Excluded Services	A0888	Noncovered ambulance mileage, per mile	1/1/1995	12/31/2078
BENE - Maine Excluded Services	A4248	Chlorhexidine antisept, 1 ml	1/1/2004	12/31/2078
BENE - Maine Excluded Services	A4270	Disposable endoscope sheath, each	1/1/1994	12/31/2078
BENE - Maine Excluded Services	A4301	Implantable access total catheter, port/res	1/1/1996	12/31/2078
BENE - Maine Excluded Services	A4642	Satumomab pendetide, imaging agent, per dose	1/1/1995	12/31/2078
BENE - Maine Excluded Services	A4651	Calibrated microcapillary tube, each	1/1/2002	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	A4652	Microcapillary tube sealant	1/1/2002	12/31/2078
BENE - Maine Excluded Services	A4653	Peritoneal dialysis catheter anchor belt, each	1/1/2003	12/31/2078
BENE - Maine Excluded Services	A4690	Dialyzers, any type, for hemodialysis, each	1/1/1986	12/31/2078
BENE - Maine Excluded Services	A4719	Y set tubing for peritoneal dialysis	1/1/2002	12/31/2078
BENE - Maine Excluded Services	A4720	Dialysat sol fld vol >249cc, for peritoneal	1/1/2002	12/31/2078
BENE - Maine Excluded Services	A4721	Dialysat sol fld vol >999cc <1999cc, for peri	1/1/2002	12/31/2078
BENE - Maine Excluded Services	A4722	Dialys sol fld vol >1999cc <2999cc, for peri	1/1/2002	12/31/2078
BENE - Maine Excluded Services	A4723	Dialys sol fld vol >2999cc <3999cc, for peri	1/1/2002	12/31/2078
BENE - Maine Excluded Services	A4724	Dialys sol fld vol >3999cc <4999cc, for peri	1/1/2002	12/31/2078
BENE - Maine Excluded Services	A4725	Dialys sol fld vol >4999cc <5999cc, for peri	1/1/2002	12/31/2078
BENE - Maine Excluded Services	A4726	Dialysate solutn fluid vol >5999cc, for peri	1/1/2002	12/31/2078
BENE - Maine Excluded Services	A4728	Dialysate solution, non-dex, 500 ml	1/1/2004	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	A9280	Alert or alarm device, noc	1/1/2004	12/31/2078
BENE - Maine Excluded Services	C9399	Unclassified drugs or biologicals	1/1/2004	8/24/2016
BENE - Maine Excluded Services	D0180	Comprehensive periodontal evaluation, new/est	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0190	Screening of a patient	1/1/2013	2/29/2020
BENE - Maine Excluded Services	D0191	Assessment of a patient	1/1/2013	2/29/2020
BENE - Maine Excluded Services	D0322	Dental tomographic survey	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0340	2D cephalometric radiographic image	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0350	2D oral/facial photograph images, intra/extraora	1/1/2000	12/31/2078
BENE - Maine Excluded Services	D0360	Cone beam ct, craniofacial data capture	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0362	Cone beam, two dimensional	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0363	Cone beam, three dimensional	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0364	Cone beam ct, limit view, less than whole jaw	1/1/2013	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D0365	Cone beam ct, full dental arch - mandible	1/1/2013	12/31/2078
BENE - Maine Excluded Services	D0366	Cone beam ct, full dental arch - maxilla	1/1/2013	12/31/2078
BENE - Maine Excluded Services	D0367	Cone beam ct, both jaws with or w/o cranium	1/1/2013	12/31/2078
BENE - Maine Excluded Services	D0368	Cone beam, tmj series, 2 or more exposures	1/1/2013	12/31/2078
BENE - Maine Excluded Services	D0369	Maxillofacial mri capture and interpretation	1/1/2013	12/31/2078
BENE - Maine Excluded Services	D0370	Maxillofacial u/s capture and interpretation	1/1/2013	12/31/2078
BENE - Maine Excluded Services	D0371	Sialoendoscopy capture and interpretation	1/1/2013	12/31/2078
BENE - Maine Excluded Services	D0380	Cone beam ct, limit view, less than whole jaw	1/1/2013	12/31/2078
BENE - Maine Excluded Services	D0381	Cone beam CT capture, full arch - mandible	1/1/2013	12/31/2078
BENE - Maine Excluded Services	D0382	Cone beam CT image capture full arch - maxilla	1/1/2013	12/31/2078
BENE - Maine Excluded Services	D0383	Cone beam CT image capture 2 jaws w/wo cranium	1/1/2013	12/31/2078
BENE - Maine Excluded Services	D0384	Cone beam CT image capture tmj inc 2+ exposures	1/1/2013	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D0385	Maxillofacial mri capture only	1/1/2013	12/31/2078
BENE - Maine Excluded Services	D0386	Maxillofacial ultrasound capture only	1/1/2013	12/31/2078
BENE - Maine Excluded Services	D0391	Interpret image not assoc w capture, w/report	1/1/2013	12/31/2078
BENE - Maine Excluded Services	D0415	Microorganisms for culture & sensitivity	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0416	Viral culture	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0417	Collect & prep saliva sample for lab diag test	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0418	Analysis of saliva sample	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0421	Genetic test susceptibility to oral disease	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0422	Collection prep genetic material lab analysis	1/1/2016	12/31/2078
BENE - Maine Excluded Services	D0423	Genetic test for susceptibility to diseases	1/1/2016	12/31/2078
BENE - Maine Excluded Services	D0425	Caries susceptibility tests	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0431	Pre-Diagnostic test to detect mucos abnorm	1/1/1980	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D0472	Gross exam, preparation and report	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0473	Gross/microscopic exam, preparation & report	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0474	Gross/micro exam w/assesment of surg margins	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0475	Decalcification procedure	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0476	Special stains for microorganisms	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0477	Special stains not for microorganisms	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0478	Immunohistochemical stains	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0479	Tissue in-situ hybridization incl interpretat	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0480	Cytopathology smear preparation and report	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0481	Electron microscopy	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0482	Direct immunofluorescence	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0483	Indirect immunofluorescence	1/1/1980	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D0484	Consultation slides prepared elsewhere	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0485	Consult inc prep of slides from biopsy	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0486	Accession transepi cyto sample, microscopic exam	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0502	Other oral pathology procedures, by report	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D0999	Unspecified diagnostic procedures, by report	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D1204	Topical application fluoride adult	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D1310	Nutritional counseling, control dental diseas	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D1354	Interim caries arr medicament appl per tooth	1/1/2016	12/31/2018
BENE - Maine Excluded Services	D1520	Space maintainer, removable unilat per quad	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2410	Dental gold foil one surface	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2420	Dental gold foil two surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2430	Dental gold foil three surfaces	1/1/1980	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D2510	Dental inlay metallic 1 surface	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2520	Dental inlay metallic 2 surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2530	Dental inlay metallic 3/more surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2542	Dental onlay metallic 2 surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2543	Dental onlay metallic 3 surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2544	Dental onlay metallic 4/more surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2610	Inlay porcelain/ceramic 1 surface	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2620	Inlay porcelain/ceramic 2 surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2630	Inlay porcelain/ceramic 3/more surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2642	Onlay porcelain/ceramic 2 surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2643	Onlay porcelain/ceramic 3 surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2644	Onlay porcelain/ceramic 4/more surfaces	1/1/1980	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D2650	Inlay resin-based composite 1 surface	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2651	Inlay resin-based composite 2 surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2652	Inlay resin-based composite 3/more surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2662	Onlay resin-based composite 2 surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2663	Onlay resin-based composite 3 surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2664	Onlay resin-based composite 4/more surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2712	Crown 3/4 resin-based compos	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2720	Crown resin with high noble metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2721	Crown resin with predomint base metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2722	Crown resin with noble metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2740	Crown - porcelain/ceramic	9/1/2010	5/31/2019
BENE - Maine Excluded Services	D2750	Crown porcelain fused to high noble metal	1/1/1980	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D2751	Crown porcelain fused to predom base metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2752	Crown porcelain fused to noble metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2780	Crown 3/4 cast high noble metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2781	Crown 3/4 cast base metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2782	Crown 3/4 cast noble metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2783	Crown 3/4 porcelain/ceramic	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2790	Crown full cast high noble metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2791	Crown full cast base metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2792	Crown full cast noble metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2794	Crown - titanium and titanium alloys	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2799	Provisional crown tx/complete prior to final	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2910	Dental re-cement inlay, onlay, veneer, partial	1/1/1980	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D2929	Prefabricated porcelain/ceramic crown	1/1/2013	12/31/2017
BENE - Maine Excluded Services	D2933	Prefab stainless steel crown w/resin window	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2934	Prefabrctated steel crown primary tooth	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2952	Post and core cast in addition to crown	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2953	Each additionall cast post, same tooth	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2955	Post removal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2960	Laminate labial veneer resin, chairside	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2961	Laminate labial veneer resin, laboratory	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2962	Laminate labial veneer porcelin, laboratory	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2971	Additional procedure to construct new crown	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2975	Coping	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D2981	Inlay repair, due to material failure	1/1/2013	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D2982	Onlay repair, due to material failure	1/1/2013	12/31/2078
BENE - Maine Excluded Services	D2983	Veneer repair, due to material failure	1/1/2013	12/31/2078
BENE - Maine Excluded Services	D2990	Resin infiltration, incipient smooth lesions	1/1/2013	12/31/2078
BENE - Maine Excluded Services	D3221	Pulpal debridement, primary/permanent	1/1/1980	12/31/2016
BENE - Maine Excluded Services	D3331	Non-surg treatment root canal obstruction	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D3332	Incomplete endodontic therapy	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D3333	Internal root repair of perforation defects	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D3421	Apicoectomy - premolar(first root)	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D3425	Apicoectomy - molar (first root)	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D3426	Apicoectomy - each additional root	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D3450	Root amputation - per root	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D3460	Endodontic endosseous implant	1/1/1980	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D3470	Intentional replantation including splinting	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D3910	Surgical isolation of tooth w/rubber dam	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D3920	Tooth splitting	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D3950	Canal prep/fitting of preformed dowel or post	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D4230	Anatomical crown exp, four of more per quad	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D4231	Anatomical crown exp, one to three per quad	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D4249	Clinical crown lengthening - hard tissue	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D4265	Bio mtrls to aid soft/osseous tiss regen	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D4266	Guided tiss regen resorbble barrier, per site	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D4267	Guided tiss regen nonresorb barrier, per site	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D4273	Autogenous connecti tissue graft per tooth	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D4274	Distal/proximal wedge procedure	1/1/1980	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D4275	Non-autogenous tissue graft	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D4276	Combined connective tissue & double ped graft	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D4283	Autogenous tissue graft each add in same graft	1/1/2016	12/31/2078
BENE - Maine Excluded Services	D4285	Non-autogenous tissue graft each additional	1/1/2016	12/31/2078
BENE - Maine Excluded Services	D4320	Provisional splinting intracoronal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D4321	Provisional splinting extracoronal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D4342	Periodontal scaling/root planing 1-3 teeth	9/1/2010	4/17/2017
BENE - Maine Excluded Services	D4342	Periodontal scaling/root planing 1-3 teeth	4/20/2017	12/31/2078
BENE - Maine Excluded Services	D4381	Localized delivery antimicrobial agents	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D5221	Immediate max partial denture - resin base	1/1/2016	12/31/2078
BENE - Maine Excluded Services	D5222	Immediate man partial denture - resin base	1/1/2016	12/31/2078
BENE - Maine Excluded Services	D5223	Immediate max partial denture - cast metal	1/1/2016	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D5224	Immediate man partial denture - cast metal	1/1/2016	12/31/2078
BENE - Maine Excluded Services	D5225	Maxillary partial denture flexible base	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D5226	Mandibular partial denture flexible base	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D5281	Removable unilateral partial denture	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D5670	Replc teeth&acrlc on mtl frmwk, maxillary	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D5671	Replc teeth&acrlc on mtl frmwk, mandibular	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D5740	Denture reline partial maxillary chairside	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D5741	Denture reline partial mandibular chairside	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D5760	Denture reline partial maxillary laboratory	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D5761	Denture reline partial mandibular laboratory	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D5810	Denture interim complete maxillary	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D5811	Denture interim complete mandibular	1/1/1980	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D5820	Denture interim partial maxillary	9/1/2010	12/31/2017
BENE - Maine Excluded Services	D5821	Denture interim partial mandibular	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D5850	Denture tissue conditioning maxillary	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D5851	Denture tissue conditioning mandibular	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D5862	Precision attachment, by report	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D5867	Replace part of semi-precnsn/precnsn attachment	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D5875	Modify removable prosthesis aftr implnt surg	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D5899	Unspecified removable prosthodontic procedure	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D5937	Trismus appliance	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D5987	Commissure splint	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D5988	Surgical splint	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D5991	Vesiculobullous disease medicament carrier	1/1/1980	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D6010	Surg placemnt, implant body, endosteal implnt	1/1/2009	1/18/2017
BENE - Maine Excluded Services	D6010	Surg placemnt, implant body, endosteal implnt	1/1/2010	1/18/2017
BENE - Maine Excluded Services	D6010	Surg placemnt, implant body, endosteal implnt	5/20/2017	12/31/2078
BENE - Maine Excluded Services	D6012	Endosteal implant	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6040	Surgical placement, eposteal implant	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6050	Surgical placement, transosteal implant	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6051	Interim abutment	1/1/2013	12/31/2078
BENE - Maine Excluded Services	D6053	Implnt/abtmnt supported removable denture	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6054	Implnt/abtmnt supported removable partial	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6055	Connecting bar implant or abutment supported	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6056	Prefabricated abutment - incl mod/placement	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6057	Custom fabricated abutment - incl placement	1/1/2000	5/21/2017

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D6058	Abutment supported porcelain/ceramic crown	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6059	Abutment spprt prcln to high nobel metal crwn	1/1/2000	5/21/2017
BENE - Maine Excluded Services	D6060	Abutment spprt prcln to predm base metal crwn	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6061	Abutment spprt prcln to nobel metal crwn	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6062	Abutment spprt cst mtl - high nobel mtl crwn	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6063	Abutment spprt cst mtl - predm basel mtl crwn	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6064	Abutment spprt cst mtl - nobel mtl crwn	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6065	Implant supported porcelain/ceramic crown	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6066	Implant spprt prcln fused to high noble alloys	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6067	Implant supported crown - high noble alloys	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6068	Abutment spprt retainer for prcln/ceramic FPD	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6069	Abtmnt spprt rtnr, prcln-high noblel mtl FPD	1/1/1980	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D6070	Abtmnt spprt rtnr, prcln-predm base mtl FPD	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6071	Abtmnt spprt rtnr, prcln-noble mtl FPD	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6072	Abtmnt spprt rtnr for high noble metal FPD	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6073	Abtmnt spprt rtnr for predm base metal FPD	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6074	Abtmnt spprt rtnr for noble metal FPD	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6075	Implant supported retainer for ceramic FPD	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6076	Implnt spprt rtnr, prcln to high noble alloy FPD	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6077	Implant spprt retainer for metal FPD noble alloy	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6078	Implnt/abtmnt spprt FD for complete arch	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6079	Implnt/abtmnt spprt FD for partial arch	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6080	Implant maintenance procedures	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6090	Repair implant supported prosthesis by report	1/1/1980	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D6091	Replacement of semi/precision attachment	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6092	Recement supported crown	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6093	Recement fixed partial denture	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6094	Abutment supported crown - titanium	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6095	Repair implant abutment, by report	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6100	Removal of implant, by report	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6101	debride/clean periimplant defect entry/close	1/1/2013	12/31/2078
BENE - Maine Excluded Services	D6102	debride/contour periimplnt defect entry/close	1/1/2013	12/31/2078
BENE - Maine Excluded Services	D6103	graft repair periimplnt defct w/o entry/close	1/1/2013	12/31/2078
BENE - Maine Excluded Services	D6104	bone graft at time of implant placement	1/1/2013	12/31/2078
BENE - Maine Excluded Services	D6190	Radiographic/surgical implant index by report	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6194	Abut support retainer crown for PFD titanium	1/1/1980	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D6199	Implant procedure, unspecified, by report	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6205	Pontic-indirect resin based composite	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6210	Pontic - cast high noble metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6211	Pontic - cast predominately base metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6212	Pontic - cast noble metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6214	Pontic - titanium and titanium alloys	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6240	Pontic - porcelain fused to high noble metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6245	Pontic - porcelain/ceramic	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6250	Pontic - resin with high noble metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6253	Provisional pontic, prior to first impression	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6548	Retainer prcln/cer for resin bond fix prosth	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6600	Porcelain/ceramic inlay 2 surfaces	1/1/1980	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D6601	Porcelain/ceramic inlay 3 or more surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6602	Cast high noble metal inlay 2 surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6603	Cast high noble metal inlay 3 or more surface	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6604	Cast prdm base metal inlay 2 surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6605	Cast prdm base metal inlay 3 or more surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6606	Cast noble metal inlay 2 surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6607	Cast noble metal inlay 3 or more surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6608	Porcelain/ceramic onlay 2 surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6609	Porcelain/ceramic onlay 3 or more surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6610	Cast high noble metal onlay 2 surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6611	Cast high noble metal onlay 3 or more surface	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6612	Cast prdm base metal onlay 2 surfaces	1/1/1980	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D6613	Cast prdm base metal onlay 3 or more surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6614	Cast noble metal onlay 2 surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6615	Cast noble metal onlay 3 or more surfaces	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6624	Inlay titanium	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6634	Onlay titanium	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6710	Crown-indirect resin based composite	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6720	Crown, resin with high noble metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6721	Crown, resin with predom base metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6722	Crown, resin with noble metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6740	Crown, porcelain/ceramic	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6750	Crown, porcelain fused to high noble metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6751	Crown, porcelain fused to predom base metal	1/1/1980	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D6752	Crown, porcelain fused to noble metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6780	Crown, 3/4 cast high noble metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6781	Crown, 3/4 cast predom base metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6782	Crown, 3/4 cast noble metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6783	Crown, 3/4 porcelain/ceramic	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6790	Crown, full cast high noble metal	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6791	Crown, full predom base metal cast	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6792	Crown, full noble metal cast	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6793	Provisional retainer crown, prior final imprs	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6794	Retainer crown - titanium and titanium alloys	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6920	Dental connector bar	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6930	Recement/re-bond fixed partial denture	1/1/1980	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D6940	Stress breaker	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6950	Precision attachment	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6970	Cast post & core plus fix prtl retainer	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6972	Prefab post & core plus fix prtl retainer	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6973	Core build up for retainer, incl any pins	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6975	Coping	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6976	Each additional cast post, same tooth	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6977	Each additionall prefab post, same tooth	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6980	Bridge repair, due to restor material failure	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6985	Pediatric partial denture, fixed	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D6999	Fixed prosthodontic procedure, unspecified	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7272	Tooth transplantation, incl reimplantation	1/1/1980	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D7282	Mobilization, erupted/malposition tooth	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7287	Cytology sample collection	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7292	Screw retained plate	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7293	Temporary anchorage device w flap	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7294	Temporary anchorage device w/o flap	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7311	Alveoloplasty w/extraction of 1-3 teeth	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7340	Vestibuloplasty ridge extension	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7350	Vestibuloplasty ridge extension w/graft	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7485	Rreduction of osseous tuberosity	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7490	Radical resecton, mandible w/bone graft	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7671	Open reduction, alveolus, simple	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7810	TMJ open reduction, dislocation	1/1/1980	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D7820	TMJ closed reduction, dislocation	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7830	TMJ manipulation under anesthesia	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7840	Removal of tmj condyle	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7852	TMJ disc repair	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7854	TMJ synovectomy, excise joint membrane	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7856	TMJ myotomy, cutting of a muscle	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7858	Tmj reconstruction	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7865	TMJ arthroplasty, reduce osseous components	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7870	Tmj aspiration joint fluid	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7871	TMJ non-arthroscopic lysis and lavage	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7872	TMJ diagnostic arthroscopy, with/without Bx	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7873	Arthroscopy lavage/lysis adhesions	1/1/1980	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D7874	Arthroscopy disc repositioning and stabilization	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7875	Arthroscopy: synovectomy	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7876	Arthroscopy: discectomy	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7877	Arthroscopy: debridement	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7881	Occlusal orthotic device adjustment	1/1/2016	12/31/2078
BENE - Maine Excluded Services	D7899	TMD unspecified therapy	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7920	Dental skin graft	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D7921	Collect/apply autologous blood concentrate	1/1/2013	12/31/2078
BENE - Maine Excluded Services	D7951	Sinus aug with bone/bone sup latrl open appr	9/1/2010	2/5/2017
BENE - Maine Excluded Services	D7951	Sinus aug with bone/bone sup latrl open appr	2/9/2017	12/31/2078
BENE - Maine Excluded Services	D7952	Sinus augmentation via a vertical approach	1/1/2013	12/31/2078
BENE - Maine Excluded Services	D7996	Implant mandible for augmentation by report	1/1/1980	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D7998	Intraoral placement of fixation device	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D8040	Limited orthodontic Tx adult dentition	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D8680	Orthodontic retention	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D8681	Removable orthodontic retainer adjustment	1/1/2016	12/31/2078
BENE - Maine Excluded Services	D8690	Orthodontic treatment	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D9120	Fix partial denture sectioning	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D9210	Local dental anesthesia w/o surgery	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D9211	Regional block anesthesia	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D9212	Trigeminal block anesthesia	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D9215	Local anesthesia with other op/surg procedures	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D9248	Non-intravenous conscious sedation	1/1/1980	12/31/2016
BENE - Maine Excluded Services	D9910	Dental apply desensitizing medicament	1/1/1980	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D9911	Apply desensitizing resin, per tooth	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D9932	Cleaning and inspection removable comp dent, max	1/1/2016	12/31/2078
BENE - Maine Excluded Services	D9933	Cleaning and inspection removable comp dent, man	1/1/2016	12/31/2078
BENE - Maine Excluded Services	D9934	Cleaning and inspection removable part dent, max	1/1/2016	12/31/2078
BENE - Maine Excluded Services	D9935	Cleaning and inspection removable part dent, man	1/1/2016	12/31/2078
BENE - Maine Excluded Services	D9941	Fabrication athletic mouthguard	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D9942	Repair/reline of occlusal guard	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D9943	Occlusal guard adjustment	1/1/2016	12/31/2078
BENE - Maine Excluded Services	D9950	Occlusion analysis, mounted case	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D9951	Limited occlusal adjustment	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D9952	Complete occlusal adjustment	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D9970	Enamel microabrasion	1/1/1980	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	D9971	Odontoplasty, 1-2 teeth incld rem enamel projct	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D9972	External bleaching, per arch, in office	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D9973	External bleaching, per tooth	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D9974	Internal bleaching, per tooth	1/1/1980	12/31/2078
BENE - Maine Excluded Services	D9975	External bleach, home application, per arch	1/1/2013	12/31/2078
BENE - Maine Excluded Services	E1500	Centrifuge for dialysis	1/1/2002	12/31/2078
BENE - Maine Excluded Services	E1510	Kidney dialysate delivery system	1/1/1986	12/31/2078
BENE - Maine Excluded Services	E1520	Heparin infusion pump for hemodialysis	1/1/1986	12/31/2078
BENE - Maine Excluded Services	E1530	Air bubble detector hemodialysis replacement	1/1/1986	12/31/2078
BENE - Maine Excluded Services	E1540	Pressure alarm for hemodialysis replacement	1/1/1986	12/31/2078
BENE - Maine Excluded Services	E1550	Bath conductivity meter for hemodialysis each	1/1/1986	12/31/2078
BENE - Maine Excluded Services	E1560	Blood leak detector hemodialysis replacement	1/1/1986	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	E1570	Adjustable chair for ESRD patients	1/1/1986	12/31/2078
BENE - Maine Excluded Services	E1575	Transducer protector/fluid barrier per 10	1/1/1986	12/31/2078
BENE - Maine Excluded Services	E1580	Unipuncture control system for hemodialysis	1/1/1986	12/31/2078
BENE - Maine Excluded Services	E1592	Auto intermittent peritoneal dialysis system	1/1/1986	12/31/2078
BENE - Maine Excluded Services	E1594	Cycler dialysis machine peritoneal dialysis	1/1/1986	12/31/2078
BENE - Maine Excluded Services	E1600	Delivery/installation charge dialysis equipmt	1/1/1986	12/31/2078
BENE - Maine Excluded Services	E1610	Reverse osmosis water purification dialysis	1/1/1986	12/31/2078
BENE - Maine Excluded Services	E1615	Deionizer water purification for hemodialysis	1/1/1986	12/31/2078
BENE - Maine Excluded Services	E1620	Blood pump for hemodialysis replacement	1/1/1986	12/31/2078
BENE - Maine Excluded Services	E1625	Water softening system for hemodialysis	1/1/1986	12/31/2078
BENE - Maine Excluded Services	E1630	Reciprocating peritoneal dialysis system	1/1/1986	12/31/2078
BENE - Maine Excluded Services	E1632	Wearable artificial kidney each	1/1/1986	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	E1635	Compact travel hemodialyzer system	1/1/1986	12/31/2078
BENE - Maine Excluded Services	E1636	Sorbent cartridges for hemodialysis per 10	1/1/1986	12/31/2078
BENE - Maine Excluded Services	E1637	Hemostats for dialysis, each	1/1/2002	12/31/2078
BENE - Maine Excluded Services	E1639	Scale, each	1/1/2002	12/31/2078
BENE - Maine Excluded Services	G0027	Semen analysis presence/motility sperm	1/1/1995	12/31/2078
BENE - Maine Excluded Services	G0102	Prostate cancer screening digital rectal exam	1/1/2000	12/31/2078
BENE - Maine Excluded Services	G0103	Prostate cancer screening PSA test	1/1/2000	10/31/2017
BENE - Maine Excluded Services	G0122	Colorectal cancer screening, barium enema	1/1/1998	12/31/2078
BENE - Maine Excluded Services	G0123	Screen cerv/vag cytopath by tech w/MD superv	4/1/1998	12/31/2078
BENE - Maine Excluded Services	G0143	Screen cerv/vaginal cyto, thin layer, rescrn	1/1/1999	12/31/2078
BENE - Maine Excluded Services	G0144	Screen cerv/vaginal cyto, thin layer, automat	1/1/1999	12/31/2078
BENE - Maine Excluded Services	G0145	Screen cerv/vaginal cyto, thin layer, phys sp	1/1/1999	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G0147	Screen cerv/vaginal cyto, automated system	1/1/1999	12/31/2078
BENE - Maine Excluded Services	G0148	Screen cerv/vaginal cyto, autosys, rescreen	1/1/1999	12/31/2078
BENE - Maine Excluded Services	G0179	MD recertification services home health pt	1/1/2001	12/31/2078
BENE - Maine Excluded Services	G0180	MD certification home health agency patient	10/1/2000	12/31/2078
BENE - Maine Excluded Services	G0181	MD supervision home health care 30 min plus	1/1/2001	12/31/2078
BENE - Maine Excluded Services	G0182	MD supervision of hospice care 30 min or more	1/1/2001	12/31/2078
BENE - Maine Excluded Services	G0219	PET imaging whole body noncovered indications	7/1/2001	12/31/2078
BENE - Maine Excluded Services	G0235	PET not otherwise specified	1/28/2005	12/31/2078
BENE - Maine Excluded Services	G0245	Initial foot exam diabetic neuropathy w/LOPS	7/1/2002	12/31/2078
BENE - Maine Excluded Services	G0246	Followup foot eval diabetic neuro pt w/LOPS	7/1/2002	12/31/2078
BENE - Maine Excluded Services	G0247	Routine foot care diabetic neuro pt w/LOPS	7/1/2002	12/31/2078
BENE - Maine Excluded Services	G0248	Demonstrate use home INR monitoring	7/1/2002	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G0250	MD INR test review interpretation mgmt	7/1/2002	12/31/2078
BENE - Maine Excluded Services	G0252	PET imaging initial diagnosis breast ca/lymph	10/1/2002	12/31/2078
BENE - Maine Excluded Services	G0255	Sensory nerve conduct test, per limb, any nrv	10/1/2002	12/31/2078
BENE - Maine Excluded Services	G0268	Remove impact wax by MD same day as hear test	1/1/2003	12/31/2078
BENE - Maine Excluded Services	G0282	Elect stimulate wound care not pressure ulcer	4/1/2003	12/31/2078
BENE - Maine Excluded Services	G0289	Arthroscopy, loose body/debride/chondroplasty	1/1/2003	12/31/2078
BENE - Maine Excluded Services	G0293	Non-covered surg proc, clinical trial per day	1/1/2003	12/31/2078
BENE - Maine Excluded Services	G0294	Non-covered procedure, clinical trial per day	1/1/2003	12/31/2078
BENE - Maine Excluded Services	G0295	Electromagnetic stimulation one or more areas	4/1/2003	12/31/2078
BENE - Maine Excluded Services	G0296	Visit to determ ldct elig	1/1/2016	6/30/2018
BENE - Maine Excluded Services	G0306	Complete automated CBC/WBC diff w/o platelet	1/1/2004	12/31/2078
BENE - Maine Excluded Services	G0307	Complete automated CBC w/o platelet	1/1/2004	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G0333	Dispense fee for inhalation initial 30 day	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G0337	Hospice evaluation preelection	1/1/2005	12/31/2078
BENE - Maine Excluded Services	G0365	Vessel mapping of hemodialysis access	1/1/2005	12/31/2078
BENE - Maine Excluded Services	G0372	MD service required for power mobility device	10/25/2005	12/31/2078
BENE - Maine Excluded Services	G0398	Home sleep test/type 2 Portable monitor	4/1/2008	12/31/2018
BENE - Maine Excluded Services	G0399	Home sleep test/type 3 Portable monitor	4/1/2008	12/31/2018
BENE - Maine Excluded Services	G0400	Home sleep test/type 4 Portable monitor	4/1/2008	12/31/2018
BENE - Maine Excluded Services	G0402	Initial preventive physical examination	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G0403	EKG for initial preventive examination	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G0404	EKG tracing for initial preventive examination	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G0405	EKG interpretation & report preventive exam	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G0406	Telehealth inpatient consultation 15min	1/1/2009	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G0407	Telehealth inpatient consultation 25min	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G0408	Telehealth inpatient consultation 35min	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G0409	CORF related services 15 mins each	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G0410	Group psychotherapy partial hospital 45-50 mins	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G0411	Inter active group psychotherapy partial	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G0412	Open treatment iliac spine unilateral/bilateral	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G0413	Pelvic ring fracture unilateral/bilateral	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G0414	Pelvic ring fracture treatment internal fixation	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G0415	Open treatment post pelvic fracture	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G0416	Saturation biopsy prostate 1-20 specimens	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G0417	Saturation biopsy prostate 21-40 specimens	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G0418	Saturation biopsy prostate 41-60 specimens	1/1/2009	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G0419	Saturation biopsy prostate: >60 specimens	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G0420	Educ svc related to CKD, ind, per sess, per 1 hr	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G0421	Educ svc related to CKD grp, per sess, per 1 hr	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G0422	Intens cardiac rehab w/wo cont ECG mon w exerc	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G0423	Intens cardiac rehab w/wo cont ECG mon w/o exerc	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G0425	Initial inpt/ED telehealth consult, typcl 30 min	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G0426	Initial inpt/ED telehealth consult, typcl 50 min	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G0427	Initial inpt/ED telehealth consult, typcl 70 min	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G0429	Dermal filler injections(s) for treatment of LDS	7/1/2010	9/30/2019
BENE - Maine Excluded Services	G0444	Depression screening annual, 15 min	1/1/2012	12/31/2018
BENE - Maine Excluded Services	G0453	Continuous intraoper neurophys monitor, 15 min	1/1/2013	12/31/2013
BENE - Maine Excluded Services	G0476	Hpv combo assay ca screening	1/1/2016	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G0911	Assessed level of activity and symptoms	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G0912	No assessed level of activity and symptoms	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G6017	Intrafraction track motion, each fraction of tx	1/1/2015	12/31/2078
BENE - Maine Excluded Services	G8006	Acute MI pt recvd aspirin at arrival	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8007	Acute MI pt did not receive aspirin	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8008	Acute MI pt ineligible for aspirin	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8009	Acute MI pt recvd Beta-blocker at arrival	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8010	Acute MI pt did not receive beta-blocker	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8011	Acute MI pt ineligible Beta-blocker at arrival	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8012	Pneumonia pt recvd antibiotic within 4 hours	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8013	Pneumonia pt w/o antibiotic within 4 hr	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8014	Pneumonia pt not eligible antibiotic	1/1/2006	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8015	Diabetic pt w/ HBA1c>9%	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8016	Diabetic pt w/ HBA1c<or=9%	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8017	DM pt ineligible for HBA1c measure	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8018	Care not provided for HbA1c	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8019	Diabetic pt w/LDL>= 100mg/dl	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8020	Diabetic pt w/LDL< 100mg/dl	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8021	Diabetic pt ineligible for LDL measure	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8022	Care not provided for LDL	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8023	DM pt w BP>=140/80	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8024	Diabetic pt wBP<140/80	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8025	Diabetic pt ineligible for BP measure	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8026	Diabetic pt w no care required for BP measure	1/1/2006	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8027	Heart Failure pt w/LVSD on ACE-I/ARB therapy	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8028	Heart Failure pt w/LVSD not on ACE-I/AR therapy	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8029	Heart Failure pt not eligible for ACE-I/ARB	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8030	Heart Failure pt w/LVSD on Beta-blocker	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8031	Heart Failure pt w/LVSD not on Beta-blocker	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8032	Heart Failure pt not eligible for Beta-blocker	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8033	Prior MI-CAD pt on Beta-blocker	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8034	Prior MI-CAD pt not on Beta-blocker	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8035	Prior MI-CAD pt ineligible Beta-blocker	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8036	AMI-CAD pt doc on antiplatelet therapy	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8037	AMI-CAD pt not docu on antiplatelet therapy	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8038	AMI-CAD ineligible antiplatelet therapy measure	1/1/2006	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8039	CAD pt w/LDL>100mg/dl	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8040	CAD pt w/LDL<or=100mg/dl	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8041	CAD pt not eligible for LDL	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8051	Osteoporosis assessed	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8052	Osteoporosis pt not assessed	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8053	Pt ineligible for osteoporosis measure	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8054	Falls assessment not documented in 12 months	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8055	Falls assessment w/ in 12 months	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8056	Not eligible for falls assessment	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8057	Hearing assessment received	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8058	Pt w/o hearing assessment	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8059	Pt ineligible for hearing assessment	1/1/2006	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8060	Urinary incontinence pt assessment	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8061	Pt not assessed for urinary incontinence	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8062	Patient not elig urinary incontinence assess	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8075	ESRD pt w/ dialysis of URR>=65%	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8076	ESRD pt w/ dialysis of URR<65%	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8077	ESRD pt not eligible for URR/KtV	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8078	ESRD pt w/Hct>or=33	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8079	ESRD pt w/Hct<33	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8080	ESRD pt ineligible for HCT/Hgb	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8081	ESRD pt w/ autogenous AV fistula	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8082	ESRD pt with other AV fistula	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8085	ESRD PT ineligible autogenous AV FISTULA	1/1/2006	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8093	COPD pt received smoking cessation	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8094	COPD pt w/o smoke cessation intervention	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8099	Osteoporosis pt given Ca+VitD supplement	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8100	Osteoporosis pt ineligible for Ca+VitD	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8103	New dx osteoporosis pt w/antiresorptive	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8104	Osteoporosis pt ineligible for antiresorptive	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8106	Bone density measure test performed	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8107	Bone density measure test ineligible	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8108	Pt received influenza vaccine	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8109	Pt w/o influenza vaccine	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8110	Pt ineligible for influenza vaccine	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8111	Pt received mammogram	1/1/2006	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8112	Pt not documented mammogram	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8113	Pt ineligible mammography	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8114	Care not provided for mamography	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8115	Pt received pneumonia vaccine	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8116	Pt did not receive pneumonia vaccine	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8117	Pt was ineligible for pneumonia vaccine	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8129	Pt treat w/antidepressant for 6 months	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8130	Pt not treat w/antidepressant 6 months	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8131	Pt ineligible for antidepressant medication	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8152	Pt w/AB 1 hour prior to incision	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8153	Pt not document for AB 1 hour prior to incision	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8154	Pt ineligible for AB therapy	1/1/2006	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8155	Pt received thromboembolism prophylaxis	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8156	Pt did not receive thromboembolism prophylaxis	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8157	Pt ineligible for thromboembolism prophylaxis	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8159	Pt w/CABG w/o IMA	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8162	Isolated CABG pt w/o preop Beta-blockade	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8164	Isolated CABG pt w/prolonged intubation	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8165	Isolated CABG pt w/o prolonged intubation	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8166	Isolated CABG required surgical re-exploration	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8167	Isolated CABG w/o surgical re-exploration	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8170	CEA/ext bypass pt on aspirin	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8171	Pt w/carot endarct/ext bypass on aspirin	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8172	CEA/ext bypass pt not on aspirin	1/1/2006	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8182	CAD pt care not provided for LDL	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8183	Heart Failure/atrial fibrillation pt on warfarin	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8184	Heart Failure/atrial fibrillation pt inelig warf	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8185	Osteoarthritis pt w/ assessment of pain	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8186	Osteoarthritis pt ineligible assessment of pain	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G8193	Antibiotic not documented prior surgery	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8196	Antibiotic not documented prior surgery	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8200	Cefazolin not documented prophylaxis	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8204	MD not document order to discontinue antibiotic	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8209	Clinician did not document	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8214	Clinician not document order VTE	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8217	Patient not received DVT prophylaxis	1/1/2007	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8219	Received DVT prophylaxis day 2	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8220	Patient not received DVT prophylaxis day 2	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8221	Patient ineligible for DVT prophylaxis	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8223	Patient not documented for prescrip antiplatelet	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8226	Patient not prescribe anticoagulant at discharge	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8231	Patient not documented for administration t-PA	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8234	Patient not documented dysphagia screening	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8238	Patient not documented to received rehab service	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8240	Internal carotid stenosis30-99%	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8243	Patient not documented MRI/CT without lesion	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8246	Patient ineligible history with new/change mole	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8248	Patient with one alarm symptom not documented	1/1/2007	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8251	Patient not documented with Barretts, endoscopy	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8254	Patient with no documentation order for barium	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8257	Patient not documented review meds discharge	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8260	Patient not documented to have decision maker	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8263	Patient not document assess urinary incontinence	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8266	Patient not doc charc urinary incontinence	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8268	Patient not doc rec care urinary incontinence	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8271	Patient no documentation screening for fall	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8274	Clinician not doc presence/absence alarm	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8276	Patient not documented mole change	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8279	Patient not documented rec physical exam skin	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8282	Patient not documented to receive counsel	1/1/2007	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8285	Patient did not rec prescription osteoporosis	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8289	Patient not documented rec Calcium/Vitamin D	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8293	COPD patient without spirometry results	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8296	COPD patient not doc bronchodilator therapy	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8298	Patient documented optic nerve evaluation	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8299	Patient not documented optic nerv evaluation	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8302	Patient documented with target IOP	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8303	Patient not documented with IOP	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8304	Clinician documented patient ineligible IOP	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8305	Clinician not provided care POAG	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8306	POAG with IOP received care plan	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8307	POAG with IOP no care plan	1/1/2007	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8308	POAG with IOP not documented plan	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8310	Patient not documented recommended antioxidant	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8314	Patient not documented to received macular exam	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8318	Patient documented not have visual functional	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8322	Patient not documented pre axial length	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8326	Patient not documented received fundus exam	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8330	Patient not documented received dilated macular	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8334	Documentation of macular not given MD	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8338	Clinician not doc patient test osteoporosis	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8341	Patient not documented for DEXA	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8345	Patient not documented have DEXA	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8351	Patient not documented to have had ECG	1/1/2007	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8354	Patient not received aspirin prior ER	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8357	Patient not documented to have ECG	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8360	Patient not documented vital signs recorded	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8362	Patient not documented 02 SAT assessed	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8365	Patient not documented mental status assessed	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8367	Patient not documented to have empiric AB	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G8370	Asthma pt w compl of survey not documented	7/1/2007	12/31/2078
BENE - Maine Excluded Services	G8371	Chemotherapy not received stage 3 colon cancer	7/1/2007	12/31/2078
BENE - Maine Excluded Services	G8372	Chemotherapy received stage 3 colon cancer	7/1/2007	12/31/2078
BENE - Maine Excluded Services	G8373	Chemotherapy plan documented prior to chemo	7/1/2007	12/31/2078
BENE - Maine Excluded Services	G8374	Chemotherapy plan not documented prior to chemo	7/1/2007	12/31/2078
BENE - Maine Excluded Services	G8375	CLL patient w/o documentation flow cytometry	7/1/2007	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8376	Breast cancer patient ineligible for tamoxifen	7/1/2007	12/31/2078
BENE - Maine Excluded Services	G8377	MD doc colon canc patient ineligible for chemo	7/1/2007	12/31/2078
BENE - Maine Excluded Services	G8378	MD doc patient ineligible for radiation therapy	7/1/2007	12/31/2078
BENE - Maine Excluded Services	G8379	Radiation tx recommended doc 12 mon office visit	7/1/2007	12/31/2078
BENE - Maine Excluded Services	G8380	Patient w stage IC-3Breast cancer w/o tamoxifen	7/1/2007	12/31/2078
BENE - Maine Excluded Services	G8381	Patient w stageIC-3Breast cancer receive tamoxif	7/1/2007	12/31/2078
BENE - Maine Excluded Services	G8382	MM patient w/o document IV bisphophonate	7/1/2007	12/31/2078
BENE - Maine Excluded Services	G8383	No documentation radiation rec w/i 12mon office	7/1/2007	12/31/2078
BENE - Maine Excluded Services	G8384	MDS patient w/o baseline cytogenetic testing	7/1/2007	12/31/2078
BENE - Maine Excluded Services	G8385	Diabetic patient with nodoc Hgb A1c within 12mo	7/1/2007	12/31/2078
BENE - Maine Excluded Services	G8386	Diabetic patient with nodoc LDL within 12mo	7/1/2007	12/31/2078
BENE - Maine Excluded Services	G8387	ESRD patient with Hct/Hgb not documented	7/1/2007	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8388	ESRD patient with URR/Ktv not doc but eligible	7/1/2007	12/31/2078
BENE - Maine Excluded Services	G8389	MDS patient no doc Fe prior to receiving EPO	7/1/2007	12/31/2078
BENE - Maine Excluded Services	G8390	Diabetic w/o document BP within 12mo	7/1/2007	12/31/2078
BENE - Maine Excluded Services	G8391	Patient with asthma no doc medication or tx	7/1/2007	12/31/2078
BENE - Maine Excluded Services	G8397	Dilated macula/fundus exam/w document	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8402	Smoke prevention intervention counseling	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8403	Smoke prevention not counseled	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8407	ABI measure documented	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8408	ABI measure not documented	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8409	Patient ineligible for ABI measure	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8423	Patient screened flu vaccination & counsel	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8424	Flu vaccine not screened	1/1/2008	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8425	Flu vaccine screened not current	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8426	Patient not appropriate for screen & counsel	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8429	Incomplete document patient on meds	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8434	Cognitive impairment screening	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8435	Cognitive screening not documented	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8436	Pt ineligible for cognitive impairment screen	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8437	Care plan developed & documented doc/pt involved	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8438	Care plan developed & doc/pt invol not document	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8439	Patient ineligible for co-developing care plan	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8440	Pain assessment documented priot to tx & f/u	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8441	No document of pain assessment	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8443	Prescription by E-Prescribing system	1/1/2008	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8445	Prescription not generated at encounter	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8446	Some prescrib printed or phoned per regs/narco	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8447	Patient visit documented using CCHIT cert emr	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8448	Patient visit documented w/non-CCHIT cert emr	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8449	Patient not doc w/EMR due to system	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8453	Tobacco use cessation intervention counsel	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8454	Tobacco use cessation intervention no counsel	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8455	Current tobacco smoker	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8456	Smokeless tobacco user	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8457	Current tobacco non-user	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8459	Documented patient receive antiviral treatment	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8461	Patient receive antiviral treat hepatitis c	1/1/2008	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8463	Patient receive antiviral treatment documented	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8465	High risk recurrence prostate cancer	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8466	Patient ineligible suicide assess; MDD remission	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8467	New dx initial/recurrent episode MDD	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8468	ACE/ARB rx patient w/abn lvef	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8469	Patient w/abn lvef ineligible ACE/ARB	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8470	Patient w/ normal lvef	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8471	LVEF not performed/documentd	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8472	ACE/ARB not rx patient w/abn lvef	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8479	MD rx'd ACE/ARB thxpy	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8480	Patient ineligible ACE/ARB thxpy	1/1/2008	12/31/2078
BENE - Maine Excluded Services	G8481	MD not rx'd ACE/ARB thxpy	1/1/2008	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8485	Report, Diabetes Measures	7/1/2008	12/31/2078
BENE - Maine Excluded Services	G8486	Report, Prev Care Measures	7/1/2008	12/31/2078
BENE - Maine Excluded Services	G8487	Report CKD Measures	7/1/2008	12/31/2078
BENE - Maine Excluded Services	G8488	Report ESRD Measures	7/1/2008	12/31/2078
BENE - Maine Excluded Services	G8489	CAD measures group	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8490	RA measures group	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8491	HIV/AIDS measures group	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8492	Perioperative Care measures group	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8493	Back pain measures group	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8494	DM measures quality actions perform	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8495	CKD measures quality actions perform	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8496	PC measures quality actions perform	1/1/2010	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8497	CABG measures quality actions perform	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8498	CAD measures quality actions perform	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8499	RA measures quality actions perform	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8500	HIV measures quality actions perform	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8501	Perioperative measure quality actions perform	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8502	BP measures quality actions perform	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8507	Patient ineligible patient verification meds	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8508	Patient ineligible; pain asses no follow up	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8518	Clinical stage b/f lung esophageal cancer surgey	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8519	Patient ineligible; clin cancer stg b/f surgery	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8520	Clinical stage b/f surgery not documented	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8524	Patch closure conventional CEA	1/1/2009	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8525	No patch closure CEA	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8526	No patch closure conventional CEA	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8534	Documentation elder maltreatment screen f/u plan	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8537	Patient ineligible elder maltreat screen no f/u	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8538	Elder maltreatment screen no f/u plan	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8544	CABG measures group	1/1/2009	12/31/2078
BENE - Maine Excluded Services	G8545	Report Hepatitis C measures group	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8546	Community-acquired pneumonia (CAP) measures grp	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8547	Report ischemic vascular measures (IVD) group	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8548	Report heart failure (HF) measures group	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8549	Hepatitis C measures group quality act perform	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8550	Community-acquired pneumonia MG qual act perform	1/1/2010	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8551	Heart failure measures group quality act perform	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8552	Ischemic vascular disease MG quality act perform	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8553	Rx generated & transmit via qualified ERx system	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8559	Pt referred to physician for otologic evaluation	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8560	Pt history of active ear drainage prev 90 days	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8561	Pt inelig for ref otologic eval w hx act drainage	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8562	Pt with no hx active ear drainage prev 90 days	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8563	Pt not refer otologic eval, reason not spec	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8564	Pt refer to doc otologic eval, reason not spec	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8565	Verific and document sudden\rapid prog hear loss	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8566	Pt not elig ref otologic eval for s/r hear loss	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8567	Pt no verif and doc sudden/rapid prog hear loss	1/1/2010	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8568	Pt not referred otologic eval, reason not spec	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8590	Most recent diastolic blood pressure < 90 mmHg	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8591	Most recent diastolic blood pressure >= 90 mmHg	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8595	Most recent LDL-C < 100 mg/dl	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8596	LDL-C was not performed	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8597	Most recent LDL-C >= 100 mg/dl	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G8636	Flu immunization admin/prev received	1/1/2011	12/31/2011
BENE - Maine Excluded Services	G8637	Patient not eligible to receive flu immunization	1/1/2011	12/31/2011
BENE - Maine Excluded Services	G8638	Flu immunization not admin/prev received	1/1/2011	12/31/2011
BENE - Maine Excluded Services	G8639	Flu immunization administered or prev received	1/1/2011	12/31/2011
BENE - Maine Excluded Services	G8640	Patient not eligible to receive flu immunization	1/1/2011	12/31/2011
BENE - Maine Excluded Services	G8641	Flu immun not admin/prev received, reason NOS	1/1/2011	12/31/2011

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8675	Blood pressure systolic >= 140 mmHg	1/1/2011	12/31/2011
BENE - Maine Excluded Services	G8676	Blood pressure diastolic >= 90 mmHg	1/1/2011	12/31/2011
BENE - Maine Excluded Services	G8677	Blood pressure systolic < 130 mmHg	1/1/2011	12/31/2011
BENE - Maine Excluded Services	G8678	Blood pressure systolic >=130 - 139 mmHg	1/1/2011	12/31/2011
BENE - Maine Excluded Services	G8679	Blood pressure diastolic < 80 mmHg	1/1/2011	12/31/2011
BENE - Maine Excluded Services	G8680	Blood pressure diastolic 80-89 mmHg	1/1/2011	12/31/2011
BENE - Maine Excluded Services	G8681	Patient hospitalized with heart failure	1/1/2011	12/31/2011
BENE - Maine Excluded Services	G8684	Patient not hospitalized with heart failure	1/1/2011	12/31/2011
BENE - Maine Excluded Services	G8686	Tobacco smoker current or 2nd hand exposure	1/1/2011	12/31/2011
BENE - Maine Excluded Services	G8687	Not tobacco smoker current not 2nd hand exposure	1/1/2011	12/31/2011
BENE - Maine Excluded Services	G8688	Smokeless tobacco current, no 2nd hand exposure	1/1/2011	12/31/2011
BENE - Maine Excluded Services	G8689	Tobacco use not assessed, reason NOS	1/1/2011	12/31/2011

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8690	Current tobacco smoker or 2nd hand exposure	1/1/2011	12/31/2011
BENE - Maine Excluded Services	G8691	Not current tobacco smoker, no 2nd hand exposure	1/1/2011	12/31/2011
BENE - Maine Excluded Services	G8692	Current smokeless tobacco, no 2nd hand exposure	1/1/2011	12/31/2011
BENE - Maine Excluded Services	G8693	Tobacco use not assessed, reason not specified	1/1/2011	12/31/2011
BENE - Maine Excluded Services	G8694	Left ventricular ejection fraction (LVEF) < 40%	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8695	Left ventricular ejection fraction (LVEF) >= 40%	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8702	Document antibiotics given 4 hr prior surgery	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8711	Prescribed or dispensed antibiotic	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8714	Hemodialysis performed 3 times per week	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8715	Hemodialysis not 3 times per week	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8716	Patient reason not greater or equal 1.2Kt/V	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8727	Hemodialy, periton dialys, or kidney transplant	1/1/2012	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8741	Not treated spoken language comprehens disorder	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8742	Patient not treated for attention disorder	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8743	Patient not treated for memory disorder	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8744	Patient not treated for motor speech disorder	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8745	Patient not treated for reading disorder	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8746	Not treated spoken language expression disorder	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8747	Patient not treated for writing disorder	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8748	Patient not treated for swallowing disorder	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8749	No signs of melanoma	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8750	Signs or symptoms of melanoma present	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8754	Most recent diastolic BP less than 90mmHg	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8755	Most recent diastolic BP > or = 90mmHg	1/1/2012	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8757	COPD measures group quality actions performed	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8758	IBD measures group quality actions performed	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8759	OSA measures group quality actions performed	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8760	Epilepsy measures group quality actions perform	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8761	Dementia measures group quality actions perform	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8762	Parkinson measures group quality actions perform	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8763	Hyperten measures group quality actions perform	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8764	CV prevent measure group quality actions perform	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8765	Cataract measures group quality actions perform	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8786	Severity of angina assess accord level activity	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8787	Angina assessed as present	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8788	Angina assessed as absent	1/1/2012	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8789	Severity angina not assess accord level activity	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8793	Most recent office visit diastolic <80mmHg	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8794	Most recent office visit diastolic 80-89mmHg	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8795	Most recent office visit diastolic >=90mmHg	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8802	Pregnancy test (urine or serum) ordered	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8803	Document reason no pregnancy test	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8805	Pregnancy test not ordered reason nos	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8819	Aneurysm minor diameter <= 5.5 cm	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8820	Aneurysm minor diameter 5.6-6.0 cm	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8821	Abdominal aortic aneurysm is not infarenal	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8822	Male patient aneurysms minor diameter >6cm	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8823	Female patient aneurysms minor diameter >6cm	1/1/2012	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8824	Female pt aneurysms minor diameter 5.6-6.0 cm	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8827	Aneurysm minor diameter <= 5.5cm for women	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8828	Aneurysm minor diameter <= 5.5cm for men	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8829	Aneurysm minor diameter 5.6-6.0cm for men	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8830	Aneurysm minor diameter >6cm for men	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8831	Aneurysm minor diameter >6cm for women	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8832	Aneurysm minor diameter 5.6-6.0cm for women	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8835	Asymptomatic patient no history TIA or stroke	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8836	Ipsilateral stroke or TIA <120 days prior CEA	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8837	Ipsilateral stroke or TIA >120 days prior CEA	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8846	Moderate or severe obstructive sleep apnea	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8847	Positive Airway Pressure therapy not prescribed	1/1/2012	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8852	Positive Air Pressure therapy prescribed	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8861	DXA ordered for osteoporosis	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8863	Not assessed bone loss risk reason nos	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8868	Patients receiving 1st course antiTNF therapy	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8879	Node negative invasive breast cancer	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8881	Breast cancer stage > T1N0M0 or T2N0M0	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8898	Intend to report COPD Measures Group	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8899	Intend to report Inflammatory Bowel Dis MG	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8900	Intend to report Obstructive Sleep Apnea MG	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8901	Intend to report Epilepsy Measures Group	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8902	Intend to report Dementia Measures Group	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8903	Intend to report Parkinson's Disease MG	1/1/2012	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G8904	Intend to report Hypertension Measures Group	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8905	Intend to report Cardiovascular Prevention MG	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8906	Intend to report Cataract Measures Group	1/1/2012	12/31/2078
BENE - Maine Excluded Services	G8940	Screen clinical depression doc, no f/u plan doc	1/1/2013	12/31/2078
BENE - Maine Excluded Services	G9003	Coordinated care fee, risk adj high, initial	10/1/2000	12/31/2078
BENE - Maine Excluded Services	G9004	Coordinated care fee, risk adj low, initial	10/1/2000	12/31/2078
BENE - Maine Excluded Services	G9005	Coordinated care fee, risk adj, maintenance	10/1/2000	12/31/2078
BENE - Maine Excluded Services	G9006	Coordinated care fee, home monitoring	10/1/2000	12/31/2078
BENE - Maine Excluded Services	G9009	Coordinated care fee, risk adj maint, level 3	10/1/2001	12/31/2078
BENE - Maine Excluded Services	G9010	Coordinated care fee, risk adj maint, level 4	10/1/2001	12/31/2078
BENE - Maine Excluded Services	G9011	Coordinated care fee, risk adj maint, level 5	10/1/2001	12/31/2078
BENE - Maine Excluded Services	G9013	ESRD demo basic bundle level I	7/1/2004	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G9014	ESRD demo expanded bundle-level II	7/1/2004	12/31/2078
BENE - Maine Excluded Services	G9016	Demo-smoking cessation counseling per session	1/1/2001	12/31/2078
BENE - Maine Excluded Services	G9018	Zanamivir, inhalation powder adm w/inhal 10mg	12/1/2004	12/31/2078
BENE - Maine Excluded Services	G9019	Oseltamivir phosphate 75mg	12/1/2004	12/31/2078
BENE - Maine Excluded Services	G9020	Rimantadine HCL 100mg oral	12/1/2004	12/31/2078
BENE - Maine Excluded Services	G9033	Amantadine HCL oral brand per 100mg	12/1/2004	12/31/2078
BENE - Maine Excluded Services	G9034	Zanamivir inhalation powder via inhaler	12/1/2004	12/31/2078
BENE - Maine Excluded Services	G9035	Oseltamivir phosphate 75 mg oral	12/1/2004	12/31/2078
BENE - Maine Excluded Services	G9036	Rimantadine HCl 100 mg oral	12/1/2004	12/31/2078
BENE - Maine Excluded Services	G9050	Oncology work-up evaluation	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9051	Oncology treatment decision after disease staged	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9052	Oncology surveillance for disease recurrence	1/1/2006	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G9053	Onc expectant management pt w/evidence cancer	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9054	Onc supervision palliative pt w/terminal cancer	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9055	Oncology visit unspecified NOS	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9056	Oncology prac mgmt adheres to guidelines	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9057	Oncology practice management differs trial	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9058	Oncology prac mgmt disagree from guidelines	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9059	Oncology prac mgmt pt opted alternative treatmnt	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9060	Oncology prac mgmt differs pt comorbid illness	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9061	Oncology prac condition not address by guidelins	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9062	Oncology prac mgmt guidelines differs nos	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9063	Oncology dx nsclc stage I no progress	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9064	Oncology dx nsclc stage 2 no progress	1/1/2006	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G9065	Oncology dx nslc stage 3A no progress	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9066	Oncology dx nslc stage 3B-4 metastatic	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9067	Oncology dx nslc extent of disease unknown nos	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9068	Oncology dx sclc/nslc limited no evidenc progre	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9069	Oncology dx sclc/nslc extensive stage at dx	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9070	Oncology dx sclc/nslc extent of disease unknwn	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9071	Oncology dx breast stage 1/2A-2B HR, no progress	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9072	Oncology dx breast stage 1/2A-2B no progress	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9073	Oncology dx breast stg-3 HR, ER/PR +ve no progre	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9074	Oncology dx breast stg 3 ER & PR -ve no progress	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9075	Oncology dx breast metastatic & recurrent	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9077	Oncology dx prostate T1-T2C no progress	1/1/2006	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G9078	Oncology dx prostate T2 no progress	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9079	Oncology dx prostate T3b-T4 no progress	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9080	Oncology dx prostate w/rise PSA	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9083	Oncology dx prostate unknown nos	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9084	Oncology dx colon t1-3,n1-2, no evidence progres	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9085	Oncology dx colon T4, N0 w/no evidence progress	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9086	Oncology dx colon T1-4 no evidence progress	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9087	Oncology dx colon metastatic evidence dx	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9088	Oncology dx colon metastatic no evidence dx	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9089	Oncology dx colon extent of disease unknown	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9090	Oncology dx rectal T1-2 no evidence progress	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9091	Oncology dx rectal T3 N0 no evidence progress	1/1/2006	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G9092	Oncology dx rectal T1-3,N1-2 no evidence progres	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9093	Oncology dx rectal T4,N,M0 no evidence progress	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9094	Oncology dx rectal M1 w/metastatic progressive	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9095	Oncology dx rectal extent unknown	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9096	Oncology dx esophageal T1-T3 no progress	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9097	Oncology dx esophageal T4 no progress	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9098	Oncology dx esophageal metastatic recurrent	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9099	Oncology dx esophageal unknown	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9100	Oncology dx gastric no evidence recurrence	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9101	Oncology dx gastric p R1-R2 no evidence progress	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9102	Oncology dx gastric unresectable no evid progres	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9103	Oncology dx gastric recurrent	1/1/2006	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G9104	Oncology dx gastric unknown NOS	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9105	Oncology dx pancreatic post R0 resection no prog	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9106	Oncology dx pancreatic post R1/R2 no progress	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9107	Oncology dx pancreatic unresectable metastatic	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9108	Oncology dx pancreatic unknown NOS	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9109	Oncology dx head/neck T1-T2 no progress	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9110	Oncology dx head/neck T3-4 no progress	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9111	Oncology dx head/neck M1 metastatic recurrent	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9112	Oncology dx head/neck extent unknown	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9113	Oncology dx ovarian stage 1A-B no progress	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9114	Oncology dx ovarian stage 1A-B or 2 w/o evid pro	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9115	Oncology dx ovarian stage 3/4 no progress	1/1/2006	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G9116	Oncology dx ovarian recurrence	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9117	Oncology dx ovarian unknown NOS	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9123	Oncology dx CML chronic phase	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9124	Oncology dx CML accelerated phase	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9125	Oncology dx CML blast phase	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9126	Oncology dx CML remission	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9128	Oncology dx multiple myeloma stage I	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9129	Oncology dx multiple myeloma stage 2 higher	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9130	Oncology dx multiple myeloma unknown	1/1/2006	12/31/2078
BENE - Maine Excluded Services	G9131	Oncology disease breast unknown NOS	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G9132	Oncology disease prostate metastases no cast	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G9133	Oncology disease prostate clinical metastases	1/1/2007	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G9134	Oncology NHLstage 1-2 no relapse no	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G9135	Oncology disease NHL stage 3-4 not relapse	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G9136	Oncology disease NHL transformed to lg Bcell	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G9137	Oncology disease NHL relapse/refractor	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G9138	Oncology disease NHL stage unknown	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G9139	Oncology disease CML disease status unknown	1/1/2007	12/31/2078
BENE - Maine Excluded Services	G9140	Frontier extended stay demonstration	10/1/2007	12/31/2078
BENE - Maine Excluded Services	G9142	Influenza A H1N1, any route of administration	10/1/2009	12/31/2078
BENE - Maine Excluded Services	G9143	Warfarin respons genetic test, any methd, any nm	1/1/2010	12/31/2078
BENE - Maine Excluded Services	G9473	Chap services at hospice, each 15 minutes	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9474	Diet counsel at hospice each 15 minutes	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9475	Other counselor at hospice each 15 minutes	1/1/2016	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G9476	Volun service at hospice each 15 minutes	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9477	Care coord at hospice each 15 minutes	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9478	Other therapist at hospice each 15 minutes	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9479	Pharmacist at hospice each 15 minutes	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9480	Admission to mccm program	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9496	Doc rsn no adeno/neopl detecting	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9497	Rec inst no smoke day surg	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9498	Antibiotic regimen prescribed	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9499	No start/rec antivir tx hep c during measurement	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9500	Rad expos ind/exp tm documented	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9501	Rad expos ind/exp tm no doc, rng	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9502	Med reas no perf foot exam	1/1/2016	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G9503	Patient taking tamsulosin hcl	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9504	Documented reason for not assessing hbv status	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9505	Abx pres w/in 10 dys of symp doc med reason	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9506	Biologic imm resp modifier presc	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9507	Documentation reas on statin or contra	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9508	Documentation pt not on statin	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9509	Adult pt mdd dys rem 12 mnths	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9510	Remis 12 months not phq-9 score <5	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9511	Idx evt dte phq>9 doc 12 mo denom	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9512	Individual pdc > 0.8	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9513	Individual pdc not > 0.8	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9514	Pt req ret or w/in 90 days of surg	1/1/2016	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G9515	Pt no reas, no ret or w/in 90 days	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9516	Pt impr vis acuit w/in 90 days	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9517	Pt no impr vis acuit w/in 90 days	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9518	Doc active injection drug use	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9519	Pt final refract +/- 1.0 in 90 days	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9520	Pt refract not +/- 1.0 w/in 90 days	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9521	Er and ip hosp <2 in 12 months	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9522	Er/ip hosp =>2 in 12 months	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9523	Pt d/c hemo or perit dialysis	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9524	Pt refer to hospice care	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9525	Doc pt reas no hospice care referr	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9526	No reason, pt no refer hospice care	1/1/2016	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G9529	Pt minor blunt trauma w/head ct	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9530	Pt minor blunt head trauma and hd ct ord ec prov	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9531	Pt doc shnt/br tum/on antipl rx	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9532	Pt head ct ord by other than ec provider	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9533	Indic for head ct not valid	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9534	Advanced brain image not ordered	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9535	Pt with normal neuro exam	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9536	Documentation med reas adv brain image	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9537	Documentation system reas img head	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9538	Advanced brain image ordered	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9539	Intent potential remv at time placemt	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9540	Pt alive 3 months post procedure	1/1/2016	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G9541	Filter removed after 3 months placmt	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9542	Doc reassessment appr remo filter 3 months	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9543	Doc 2x to reach pt re-assess filt remov	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9544	No filter remov w/in 3 months plem	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9547	Cys ren les or adren	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9548	No follow-up rec image study	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9549	Doc med reas follow up imag indicated	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9550	Imag with follow-up recommended	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9551	Abd imag w/o liver/kid/adr lesion	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9552	Incidental thyroid node <1.0 CM in rpt	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9553	Prior thyroid disease diagnosis	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9554	Ct/mri chest/neck follow up recommended	1/1/2016	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G9555	Doc med reas no follow up imag	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9556	Ct/mri chest follow up not recommended	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9557	Ct/mri chest/neck no thy nod <1.0 CM	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9558	Pt tx beta-lactam abx therapy	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9559	Doc med reas no beta-lactam abx therapy	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9560	No beta-lactam abx ther, reason not given	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9561	Pt prescribed opiates >6 weeks	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9562	Follow-up eval q3 months opioid tx	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9563	No follow-up eval q3 months opioid tx	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9572	Index date phq-scr >9 doc in 12 month time	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9573	Adult pt md or dys rem 6 mon	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9574	Adult pt md dys no rem 6 mon	1/1/2016	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G9577	Pt prescribed opiates >6 weeks	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9578	Doc opioid tx 1x during opioid therapy	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9579	No doc opioid tx 1x during opioid therapy	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9580	Door to puncture time <2 hours	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9581	Md doc, door to puncture time >2 hours	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9582	Door to puncture time >2hr, no reason given	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9583	Pt presc opiates >6 weeks	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9584	Eval opioid use instr/pt interviewed	1/1/2016	5/31/2018
BENE - Maine Excluded Services	G9585	No eval opiates use instr/intv	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9593	Ped pt low risk pecarn prediction head trauma	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9594	Pt minor blunt head trauma head ct ord ec prov	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9595	Doc shnt/tum/coag	1/1/2016	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G9596	Ped pt head ct ord	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9597	Ped pt no low pecarn ped head traum	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9598	Aortic ane 5.5-5.9 CM max diameter	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9599	Aortic ane >=6.0 cm max diameter	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9600	Symp aaa urgent non-elect repair	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9601	Pt dchg home post op day 7	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9602	Pt not dchg home postop day 7	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9603	Pt survey improv bsline treatment	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9604	Pt survey results not available	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9605	Survey score no improv w/baseline tx	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9606	Intraop cystoscopy eval trac injury	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9607	Patient not eligible	1/1/2016	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G9608	Intraop cystoscopy eval not done for low injury	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9609	Doc order anti-plat or p2y12 antagonists	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9610	Doc md rsn no anti-plat/p2y12	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9611	No anti-pla/p2y12 ord, reason not otherwise spec	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9612	Phodoc 2 mr cec landmarks	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9613	Doc post-surgical anatomy	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9614	Photodoc < 2 cec landmarks	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9615	Preoperative assessment documented	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9616	Doc reason no preop assessment	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9617	Pre-op assessment not doc, reason not given	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9618	Doc scr uterine malignancy or us/samp	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9619	Doc rsn not scr uterine malignancy	1/1/2016	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G9620	No scr uterine malig/us/samp reason not given	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9621	Scr unhealthy etoh w/counsel	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9622	Pt not unhealthy etoh user when screened	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9623	Doc med rsn no screening for unhealthy etoh use	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9624	No unhealthy etoh scr/no councl reason not given	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9625	Pt bl srg 30 day post surgery	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9626	Patient not eligible	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9627	Pt no bladder injury at surg 30 day post surgery	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9628	Pt bwli srg 30 day post surgery	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9629	Patient not eligible	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9630	Pt no bwli srg 30 day post surgery	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9631	Pt ui srg 30 day post surgery	1/1/2016	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G9632	Patient not eligible	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9633	Pt no ui srg 30 day post surgery	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9634	Health-related quality life tool 2x same/impr	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9635	No doc rsn do quality life assessed	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9636	No life assessed 2x same/declined	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9637	Doc >1 dose reduction techniques	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9638	No doc >1 dose reduction techniques	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9639	Amputation no reqd in 48 hours ieler proc	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9640	Doc planned hybrid/staged procedure	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9641	Amputation reqd w/in 48 hours ieler procedure	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9642	Current cigarette smoker	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9643	Elective surgery	1/1/2016	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G9644	Pt not smoking b/4 anes day of surg	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9645	Pt smoking b/4 anes day surg	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9646	Pt w/90 day mrs 0-2	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9647	No mrs score in 90 day follow-up	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9648	Pt w/90 day mrs score >2	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9649	Psoriasis assessment tool doc spc benchmk	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9650	Doc pt no therapy chg or contraindications	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9651	Psoriasis assessment tool doc/no spc bnchmk met	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9652	Pt tx sys bio med psoriasis 6 months	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9653	Pt no tx sys bio rx psoriasis 6 months	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9654	Monitored anesthesia care (mac)	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9655	Transfer of care protocol/tool incl key elem	1/1/2016	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G9656	Pt direct transferred from anesth loc to pacu	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9657	Transfer of care during anesthetic to icu	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9658	Transfer of care tool incl elem not used	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9659	>85y no hx colorectal ca/rsn for colonoscopy	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9660	Doc med rsn colonoscopy pt >85 years	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9661	>85 years routine colonoscopy othr rsn	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9662	Prior dx/active dx clinical ascvd	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9663	Fasting/direct ldl-c <= 190 mg/dl	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9664	Taking statin therapy or rec'd order	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9665	No statin/no order statin therapy	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9666	Fasting/dir ldl-c 70-189mg/dl measurement period	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9667	Doc med rsn no statin therapy/presc	1/1/2016	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	G9669	Intend report mult chronic msr grp	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9670	Qty actions multi chronic cond msr grp perf	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9671	Intend rpt diabetic retinopathy msr grp	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9672	Qty act diabetoc retinopathy msr grp perf	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9673	Intend rpt cardiovascular prevention msr grp	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9674	Pt w/clinical ascvd diagnosis	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9675	Pt w/fasingt/dir lab ldl-c >190 mg/dl	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9676	40-75y w/type 1/2 diabetes w/ldl-c results	1/1/2016	12/31/2078
BENE - Maine Excluded Services	G9677	Qty act cardiovascular prevention mg perf	1/1/2016	12/31/2078
BENE - Maine Excluded Services	J0257	Glassia injection, 10 mg	1/1/2012	12/31/2015
BENE - Maine Excluded Services	J0712	Ceftaroline fosamil injection, 10 mg	1/1/2012	12/31/2078
BENE - Maine Excluded Services	J0840	Crotalidae poly immune fab inject, up to 1 gr	1/1/2012	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	J3530	Nasal vaccine inhalation	1/1/1986	12/31/2078
BENE - Maine Excluded Services	J3535	Metered dose inhaler drug administration	1/1/1994	12/31/2078
BENE - Maine Excluded Services	J7199	Hemophilia clot factor,not otherwise classifi	1/1/2000	1/11/2015
BENE - Maine Excluded Services	J7199	Hemophilia clot factor,not otherwise classifi	5/21/2015	8/24/2016
BENE - Maine Excluded Services	J7199	Hemophilia clot factor,not otherwise classifi	5/24/2017	8/13/2017
BENE - Maine Excluded Services	J7330	Autologous cultured chondrocytes, implant	1/1/2001	4/30/2020
BENE - Maine Excluded Services	J7599	Immunosuppressive drug, not otherwise classif	1/1/1996	12/31/2078
BENE - Maine Excluded Services	J7999	Compounded drug, not otherwise classified	1/1/2016	12/31/2078
BENE - Maine Excluded Services	J8499	Oral prescription drug, non chemotherapy, NOS	1/1/1995	12/31/2078
BENE - Maine Excluded Services	J8561	Oral everolimus, 0.25 mg	1/1/2012	12/31/2078
BENE - Maine Excluded Services	J8999	Oral prescription drug chemotherapeutic NOS	1/1/1995	12/31/2078
BENE - Maine Excluded Services	J9216	Interferon gamma 1-B, 3 million units	1/1/1993	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	J9600	Porfimer sodium, 75 MG, injection	1/1/1998	12/31/2078
BENE - Maine Excluded Services	M0064	Visit for drug monitoring, brief, mental	1/1/1992	12/31/2078
BENE - Maine Excluded Services	M0075	Cellular therapy	1/1/1986	12/31/2078
BENE - Maine Excluded Services	M0076	Prolotherapy	1/1/1986	12/31/2078
BENE - Maine Excluded Services	M0100	Intragastric hypothermia gastric freezing	1/1/1986	12/31/2078
BENE - Maine Excluded Services	M0300	IV chelation therapy, chemical endarterectomy	1/1/1986	12/31/2078
BENE - Maine Excluded Services	M0301	Fabric wrapping of aneurysm abdominal	1/1/1986	12/31/2078
BENE - Maine Excluded Services	P2028	Cephalin flocculation test, blood	1/1/1986	12/31/2078
BENE - Maine Excluded Services	P2029	Congo red blood test	1/1/1986	12/31/2078
BENE - Maine Excluded Services	P2031	Hair analysis (excluding arsenic)	1/1/1986	12/31/2078
BENE - Maine Excluded Services	P2033	Blood thymol turbidity	1/1/1986	12/31/2078
BENE - Maine Excluded Services	P2038	Blood mucoprotein (seromucoid)	1/1/1986	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	P3000	Screen pap by tech w/MD suprvis, up to 3 smrs	1/1/1992	12/31/2078
BENE - Maine Excluded Services	P7001	Culture bacterial urine, quantitative, sensit	1/1/1986	12/31/2078
BENE - Maine Excluded Services	P9070	Pathogen reduced plasma pool, each unit	1/1/2016	12/31/2078
BENE - Maine Excluded Services	P9071	Pathogen reduced plasma sing, each unit	1/1/2016	12/31/2078
BENE - Maine Excluded Services	P9072	Plate path red/rapid bac test, each unit	1/1/2016	12/31/2078
BENE - Maine Excluded Services	P9603	One-way allow prorated miles lab specm,actual	1/1/1987	12/31/2078
BENE - Maine Excluded Services	P9604	One-way allow prorated trip lab spec trip chg	1/1/1987	12/31/2078
BENE - Maine Excluded Services	P9612	Catheterize for urine specimen, single pt	1/1/1999	1/31/2018
BENE - Maine Excluded Services	P9615	Urine specimen collection, multiple patients	1/1/1985	12/31/2078
BENE - Maine Excluded Services	Q0091	Obtaining screen pap smear; prep/convy to lab	9/1/2010	12/31/2016
BENE - Maine Excluded Services	Q0092	Set up portable x-ray equipment	1/1/1993	12/31/2078
BENE - Maine Excluded Services	Q0111	Wet mounts including preparatn, vag/cerv/skin	1/1/1994	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	Q0112	All potassium hydroxide preparations	1/1/1994	12/31/2078
BENE - Maine Excluded Services	Q0113	Pinworm examinations	1/1/1994	12/31/2078
BENE - Maine Excluded Services	Q0114	Fern test	1/1/1994	12/31/2078
BENE - Maine Excluded Services	Q0115	Post-coital mucous exam, vaginal or cervical	1/1/1994	12/31/2078
BENE - Maine Excluded Services	Q0144	Azithromycin dihydrate, 1 gram, oral	7/1/1996	12/31/2078
BENE - Maine Excluded Services	Q0181	Unspec dosage, anti-emetic, oral, <=48 hr rg	4/1/1998	12/31/2078
BENE - Maine Excluded Services	Q2025	Oral Fludarabine phosphate, 1 mg	7/1/2010	12/31/2078
BENE - Maine Excluded Services	Q2026	Radiesse injection, 0.1 ml	7/1/2010	9/30/2019
BENE - Maine Excluded Services	Q2027	Sculptra injection, 0.1 ml	7/1/2010	12/31/2013
BENE - Maine Excluded Services	Q3026	Subcutan injection interferon beta-1a, 11 mcg	1/1/2003	12/31/2078
BENE - Maine Excluded Services	Q4050	Cast supplies, unlisted types and materials	7/1/2001	12/31/2078
BENE - Maine Excluded Services	Q4051	Splint supplies, miscellaneous	7/1/2001	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	Q4109	Tissuemend skin substitute, per sq cm	1/1/2009	12/31/2010
BENE - Maine Excluded Services	Q4131	Epifix, per square centimeter	1/1/2013	10/31/2017
BENE - Maine Excluded Services	Q4132	Grafix core, per square centimeter	1/1/2013	10/31/2017
BENE - Maine Excluded Services	Q4133	Grafix prime, per square centimeter	1/1/2013	10/31/2017
BENE - Maine Excluded Services	Q4161	Bio-connekt wound matrix per square CM	1/1/2016	12/31/2078
BENE - Maine Excluded Services	Q4162	Woundex flow, bioskin flow, 0.5 cc	1/1/2016	12/31/2078
BENE - Maine Excluded Services	Q4163	Woundex, bioskin, per square centimeter	1/1/2016	12/31/2078
BENE - Maine Excluded Services	Q4164	Helicoll, per square centimeter	1/1/2016	12/31/2078
BENE - Maine Excluded Services	Q4165	Keramatrix, Kerasorb per sq cm	1/1/2016	12/31/2078
BENE - Maine Excluded Services	Q5001	Hospice or home health care in home	1/1/2007	12/31/2078
BENE - Maine Excluded Services	Q5002	Hospice or home health in assisted living	1/1/2007	12/31/2078
BENE - Maine Excluded Services	Q5003	Hospice in LT/non-skilled NF	1/1/2007	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	Q5004	Hospice in SNF	1/1/2007	12/31/2078
BENE - Maine Excluded Services	Q5005	Hospice, inpatient hospital	1/1/2007	12/31/2078
BENE - Maine Excluded Services	Q5006	Hospice in hospice facility	1/1/2007	12/31/2078
BENE - Maine Excluded Services	Q5007	Hospice in LTCH	1/1/2007	12/31/2078
BENE - Maine Excluded Services	Q5008	Hospice in inpatient psychiatric facility	1/1/2007	12/31/2078
BENE - Maine Excluded Services	Q5009	Hospice or home health, place NOS	1/1/2007	12/31/2078
BENE - Maine Excluded Services	R0070	Transport portable x-ray per trip,one pt seen	1/1/1982	12/31/2078
BENE - Maine Excluded Services	R0075	Transport port x-ray multiple patients,per pt	1/1/1986	12/31/2078
BENE - Maine Excluded Services	R0076	Transport portable EKG to location, per pt	1/1/1984	12/31/2078
BENE - Maine Excluded Services	S0012	Butorphanol tartrate, nasal spray, 25 mg	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S0014	Tacrine hydrochloride, 10 mg	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S0017	Injection, aminocaproic acid, 5 grams	1/1/2000	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S0021	Injection, ceftoperazone sodium, 1 gram	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S0023	Injection, cimetidine HCL, 300 mg	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S0028	Injection, fanotidine, 20 mg	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S0030	Injection, metronidazole, 500 mg	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S0032	Injection, nafcillin sodium, 2 grams	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S0034	Injection, ofloxacin, 400 mg	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S0039	Injctn, sulfamethoxazole & trimethoprim 10 ml	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S0040	Injctn, ticarcillin disod & clvult pot, 3.1g	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S0073	Injection, aztreonam, 500 mg	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S0074	Injection, cefotetan disodium, 500 mg	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S0077	Injection, clindamycin phosphate, 300 mg	1/1/2000	6/30/2020
BENE - Maine Excluded Services	S0078	Injection, fosphenytoin sodium, 750 mg	1/1/2000	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S0080	Injection, pentamidine isethionate, 300 mg	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S0081	Injection, piperacillin sodium, 500 mg	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S0088	Imatinib, 100 mg	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0090	Sildenafil citrate, 25 mg	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S0091	Granisetron hydrochloride, 1mg	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0092	Injection hydromorphone, 250 mg	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0093	Injection morphine sulfate, 500 mg	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0104	Zidovudine, oral, 100 mg	10/1/2002	12/31/2078
BENE - Maine Excluded Services	S0106	Bupropion HCl SR 60 tablets, 150 mg	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S0108	Mercaptopurine, oral, 50 mg	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S0109	Methadone, oral, 5 mg	7/1/2004	12/31/2078
BENE - Maine Excluded Services	S0117	Tretinoin topical 5 grams	7/1/2004	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S0122	Injection menotropins, 75 IU	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S0126	Injection follitropin alfa , 75 IU	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S0128	Injection follitropin beta, 75 IU	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S0132	Injection ganirelix acetate, 250 mcg	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S0136	Clozapine, 25 mg	4/1/2003	12/31/2078
BENE - Maine Excluded Services	S0137	Didanosine (DDI), 25 mg	4/1/2003	12/31/2078
BENE - Maine Excluded Services	S0138	Finasteride, 5 mg	4/1/2003	12/31/2078
BENE - Maine Excluded Services	S0139	Minoxidil, 10 mg	4/1/2003	12/31/2078
BENE - Maine Excluded Services	S0140	Saquinavir, 200 mg	4/1/2003	12/31/2078
BENE - Maine Excluded Services	S0142	Colistimethate sodium, inh sol per mg	1/1/2005	12/31/2078
BENE - Maine Excluded Services	S0145	Peg interferon alfa-2A, 180mcg per ml	7/1/2005	12/31/2078
BENE - Maine Excluded Services	S0146	Peg interferon alfa-2B, 10mcg per 0.5 ml	7/1/2005	9/30/2010

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S0155	Sterile dilutant for epoprostenol, 50 ml	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0156	Exemestane, 25 mg	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S0157	Becaplermin gel 0.01%, 0.5 gram	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S0160	Dextroamphetamine sulfate, 5 mg	4/1/2004	12/31/2078
BENE - Maine Excluded Services	S0161	Calcitrol, 0.25 mcg	4/1/2004	9/30/2010
BENE - Maine Excluded Services	S0164	Injection, pantoprazole sodium, 40 mg	4/1/2004	12/31/2078
BENE - Maine Excluded Services	S0166	Injection, olanzapine, 2.5 mg	7/1/2004	3/31/2019
BENE - Maine Excluded Services	S0166	Injection, olanzapine, 2.5 mg	10/1/2004	3/31/2019
BENE - Maine Excluded Services	S0170	Anastrozole, oral, 1 mg	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0171	Injection, bumetanide 0.5 mg	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0172	Chlorambucil, oral, 2 mg	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0174	Dolasetron mesylate, oral, 50 mg	1/1/2002	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S0175	Flutamide, oral, 125 mg	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0176	Hydroxyurea, oral, 500 mg	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0177	Levamisole hydrochloride, oral, 50 mg	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0178	Lomustine, oral, 10 mg	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0179	Megestrol acetate, oral, 20 mg	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0181	Ondansetron hydrochloride, oral, 4 mg	1/1/2002	12/31/2011
BENE - Maine Excluded Services	S0182	Procarbazine hydrochloride, oral 5 mg	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0183	Prochlorperazine maleate, oral, 5 mg	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0187	Tamoxifen citrate, oral, 10 mg	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0189	Testosterone pellet, oral, 75 mg	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0190	Mifepristone, oral, 200 mg	1/1/2001	9/18/2019
BENE - Maine Excluded Services	S0191	Misoprostol, oral, 200 mcg	1/1/2001	9/18/2019

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S0194	Dialysis/stress vitamin supplement,100 capsul	4/1/2004	12/31/2078
BENE - Maine Excluded Services	S0195	Pneumococcal conjugate vaccine, ages 5-9 yrs	1/1/2003	12/31/2078
BENE - Maine Excluded Services	S0196	Poly-l-lactic acid 1ml face	1/1/2005	9/30/2010
BENE - Maine Excluded Services	S0197	Prenatal vitamins 30 day supply	1/1/2005	12/31/2078
BENE - Maine Excluded Services	S0199	Medical abortion including all servs exc drug	1/1/2001	9/18/2019
BENE - Maine Excluded Services	S0201	Partial hospitalization serv, <24 hrs /diem	10/1/2002	6/7/2018
BENE - Maine Excluded Services	S0207	Paramedic intrcept nonhospital, non-transport	10/1/2002	12/31/2078
BENE - Maine Excluded Services	S0208	Paramed intrcept non-voluntary, non-transport	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0220	Medical conference by MD w team, 30 mins	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S0221	Medical conference by MD w team, 60 min	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S0255	Hospice referral visit nonmedical personnel	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0257	End of life counseling	1/1/2005	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S0260	History and physical for surgery	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0265	Genetic counseling, each 15 mins	7/1/2005	12/31/2078
BENE - Maine Excluded Services	S0270	Home standard monthly case rate 30 days	4/1/2007	12/31/2078
BENE - Maine Excluded Services	S0271	Home hospice monthly case rate 30 days	4/1/2007	12/31/2078
BENE - Maine Excluded Services	S0272	Home episodic monthly case 30 days	4/1/2007	12/31/2078
BENE - Maine Excluded Services	S0273	MD home visit outside capitation	4/1/2007	12/31/2078
BENE - Maine Excluded Services	S0274	Nurse practioner visit outside capitation	4/1/2007	12/31/2078
BENE - Maine Excluded Services	S0280	Medical home prog, comp coord/plan, initial plan	1/1/2010	12/31/2078
BENE - Maine Excluded Services	S0281	Medical home prog, care coord, plan, maintenance	1/1/2010	12/31/2078
BENE - Maine Excluded Services	S0302	Completed EPSDT service	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0310	Hospitalist services	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0315	Disease management program, initial	10/1/2002	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S0316	Disease managment follow-up/reassessment	10/1/2002	12/31/2078
BENE - Maine Excluded Services	S0317	Disease management program, per diem	7/1/2003	12/31/2078
BENE - Maine Excluded Services	S0320	RN telephone calls to DMP, per month	10/1/2002	12/31/2078
BENE - Maine Excluded Services	S0340	Lifestyle modification program CAD 1st stage	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0341	Lifestyle modification program CAD 2/3 stage	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0342	Lifestyle modification program CAD 4th stage	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0390	Routine foot care maintenance, per visit	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S0395	Impression casting ft by other than manuf ort	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0400	Global fee for ESW lithotripsy kidney stones	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0500	Disposable contact lens, per lens	7/1/2001	12/31/2078
BENE - Maine Excluded Services	S0504	Single vision prescription lens, per lens	7/1/2001	12/31/2078
BENE - Maine Excluded Services	S0506	Bifocal vision prescription lens, per lens	7/1/2001	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S0508	Trifocal prescription lens, per lens	7/1/2001	12/31/2078
BENE - Maine Excluded Services	S0510	Non-prescription lens, per lens	7/1/2001	12/31/2078
BENE - Maine Excluded Services	S0512	Daily wear specility contact lens, per lens	7/1/2001	12/31/2078
BENE - Maine Excluded Services	S0514	Color contact lens, per lens	7/1/2001	12/31/2078
BENE - Maine Excluded Services	S0515	Scleral lens, liquid bandage device, per lens	7/1/2004	12/31/2078
BENE - Maine Excluded Services	S0515	Scleral lens, liquid bandage device, per lens	10/1/2004	12/31/2078
BENE - Maine Excluded Services	S0518	Sunglasses frames	7/1/2001	12/31/2078
BENE - Maine Excluded Services	S0580	Polycarbonate lens	7/1/2001	12/31/2078
BENE - Maine Excluded Services	S0581	Nonstandard lens	7/1/2001	12/31/2078
BENE - Maine Excluded Services	S0590	Miscellaneous integral lens service	7/1/2001	12/31/2078
BENE - Maine Excluded Services	S0592	Comprehensive contact lens evaluation	7/1/2001	12/31/2078
BENE - Maine Excluded Services	S0595	New lenses in patients old frame	1/1/2005	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S0601	Screening proctoscopy	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S0610	Annual gynecological examination, new patient	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S0612	Annual gynecological exam,established patient	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S0613	Annual breast exam w/o pelvic	7/1/2005	12/31/2078
BENE - Maine Excluded Services	S0618	Audiometry for hearing aid	4/1/2004	12/31/2078
BENE - Maine Excluded Services	S0620	Routine ophthalmological examination, new pt	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S0621	Routine ophthalmological exam, established pt	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S0622	Physical exam for college, new or established	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S0625	Digital screening retinal	1/1/2005	12/31/2011
BENE - Maine Excluded Services	S0625	Digital screening retinal	4/1/2005	12/31/2078
BENE - Maine Excluded Services	S0630	Removal of sutures by MD other than initial	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S0800	Laser in situ keratomileusis (LASIK)	1/1/2000	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S0810	Photorefractive keratectomy (PRK)	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S0812	Phototherapeutic keratectomy (PTK)	7/1/2001	12/31/2078
BENE - Maine Excluded Services	S1001	Deluxe item, patient ware	7/1/2001	12/31/2078
BENE - Maine Excluded Services	S1002	Customized item	7/1/2001	12/31/2078
BENE - Maine Excluded Services	S1015	IV tubing extension set	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S1016	Non-pvc intravenous administration set	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S1030	Noninvasive glucose monitoring device purchas	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S1031	Noninvasive glucose monitoring device rental	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S2053	Transplantation small intestine/liver allogrf	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S2054	Transplantation of multivisceral organs	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S2055	Harvesting of donor multivisl organs, cadaver	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S2060	Lobar lung transplantation	1/1/2001	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S2061	Donor lobectomy (lung) transplantation living	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S2065	Simultaneous pancreas kidney transplant	7/1/2001	12/31/2078
BENE - Maine Excluded Services	S2066	Breast GAP flap reconstruction	7/1/2007	12/31/2078
BENE - Maine Excluded Services	S2067	Breast 'stacked' DIEP/GAP reconstruction	7/1/2007	12/31/2078
BENE - Maine Excluded Services	S2068	Breast DIEP or SIEA flap reconstruction	1/1/2006	12/31/2078
BENE - Maine Excluded Services	S2070	Cystourethroscopy laser Tx ureteral calculi	10/1/2003	12/31/2078
BENE - Maine Excluded Services	S2079	Laparoscopic esophagomyotomy	1/1/2006	12/31/2078
BENE - Maine Excluded Services	S2080	Laser assisted uvuloplasty (laup)	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S2083	Adjustment of gastric band via subcutan port	4/1/2004	12/31/2078
BENE - Maine Excluded Services	S2095	Transcath embolizatr ytrium-90 microspheres	1/1/2004	12/31/2078
BENE - Maine Excluded Services	S2102	Islet cell tissue transplant pancreas, allogeneic	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S2103	Adrenal tissue transplant to brain	1/1/2001	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S2107	Adoptive immunotherapy, per course of tx	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S2112	Knee arthroscopy, harvesting cartilage	7/1/2001	12/31/2078
BENE - Maine Excluded Services	S2115	Periacetabular osteotomy, w internal fixation	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S2117	Arthroereisis, subtalar	10/1/2005	12/31/2078
BENE - Maine Excluded Services	S2118	Total hip resurfacing inc acetabular and femoral	10/1/2008	12/31/2078
BENE - Maine Excluded Services	S2120	Low density lipoprotein (LDL) apheresis	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S2140	Cord blood harvest for transplant, allogeneic	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S2142	Cord blood-derived stem-cell transpl, allogeneic	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S2150	Bone marrow/stem cell hrvt/trnsplnt w/global	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S2152	Solid organ(s)cmplt/sgmntl transplant package	4/1/2004	12/31/2078
BENE - Maine Excluded Services	S2202	Echosclerotherapy	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S2205	Miniml invas direct CABG,single art cor graft	1/1/2000	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S2206	Miniml invasive direct CABG, 2 cor art graft	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S2207	Miniml invas direct CABG, art grft 2 cor grft	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S2208	Min invas direct CABG, art/ven gft, sing ven	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S2209	Min invas direct CABG, 2 art grft 1 ven graft	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S2225	Myringotomy laser-assist	1/1/2004	12/31/2078
BENE - Maine Excluded Services	S2230	Implant semi-imp hearing device ossicles ear	10/1/2003	12/31/2078
BENE - Maine Excluded Services	S2235	Implantation of auditory brain stem implant	10/1/2003	12/31/2078
BENE - Maine Excluded Services	S2260	Induced abortion 17-24 weeks, any surg method	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S2265	Induced abortion 25-28 weeks	10/1/2002	12/31/2078
BENE - Maine Excluded Services	S2266	Induced abortion 29-31 weeks	10/1/2002	12/31/2078
BENE - Maine Excluded Services	S2267	Induced abortion 32 weeks or more	10/1/2002	12/31/2078
BENE - Maine Excluded Services	S2270	Insertion vaginal cylinder	10/1/2008	3/31/2011

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S2300	Arthroscopy, shoulder, surgical thernl capsul	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S2325	Hip core decompression	10/1/2006	12/31/2078
BENE - Maine Excluded Services	S2340	Chemodenervation abductor muscle, vocal cord	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S2341	Chemodenervation adductor muscle, vocal cord	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S2342	Nasal endoscopy postop debride aftr sinus surg	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S2344	Endoscopy balloon nasal/sinus	1/1/2007	3/31/2011
BENE - Maine Excluded Services	S2348	Decompress disc RF lumbar	1/1/2005	12/31/2078
BENE - Maine Excluded Services	S2350	Diskectomy, anterior, w/decompres, 1 intersp	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S2351	Diskectomy, anterior, w/decompres, add intrsp	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S2360	Perc vertebroplasty cervical 1 vertebral body	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S2361	Perc vertebroplasty cervical each additional	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S2400	Repair congen diaphragm hernia fetus in utero	1/1/2002	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S2401	Repair urinry trct obstruct in fetus in utero	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S2402	Repair congen cystc malform in fetus in utero	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S2403	Repair pulmonary sequestrat in fetus in utero	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S2404	Repair myelomeningocele in fetus in utero	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S2405	Repair of sacrococ teratoma in fetus in utero	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S2409	Repair congenit malform of fetus in utero NOC	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S2900	Robotic surgical system	7/1/2005	12/31/2078
BENE - Maine Excluded Services	S3000	Diabetic indicator dilated retinal exam bilat	4/1/2003	12/31/2078
BENE - Maine Excluded Services	S3005	Evaluation, pt self-assess depression	1/1/2005	12/31/2078
BENE - Maine Excluded Services	S3005	Evaluation, pt self-assess depression	4/1/2005	12/31/2078
BENE - Maine Excluded Services	S3600	Stat laboratory request	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S3601	Emergency stat lab charge home/nursing facilt	1/1/2002	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S3620	Newborn metabolic screening panel	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S3625	Maternal serum triple marker screen	7/1/2003	12/31/2078
BENE - Maine Excluded Services	S3626	Maternal serum quad marker screen	10/1/2005	12/31/2078
BENE - Maine Excluded Services	S3628	PAMG-1 rapid immunoassay for ROM	4/1/2008	6/30/2011
BENE - Maine Excluded Services	S3630	Eosinophil blood count, direct	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S3645	HIV-1 antibody testing oral mucosal transudat	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S3650	Saliva test, hormone level; during menopause	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S3652	Saliva test,horm level; to assess preterm rsk	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S3655	Antisperm antibodies test	10/1/2002	12/31/2078
BENE - Maine Excluded Services	S3708	Gastrointestinal fat absorption study	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S3711	Circulating tumor cell test	1/1/2009	3/31/2012
BENE - Maine Excluded Services	S3713	Kras mutation analysis testing	10/1/2009	3/31/2012

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S3800	Genetic testing ALS	7/1/2007	12/31/2078
BENE - Maine Excluded Services	S3818	BRCA1 complete gene sequence analysis	7/1/2001	3/31/2012
BENE - Maine Excluded Services	S3819	BRCA2 complete gene sequence analysis	7/1/2001	3/31/2012
BENE - Maine Excluded Services	S3820	Comp BRCA1/BRCA2 analy suscep brst&ovarian ca	4/1/2003	3/31/2012
BENE - Maine Excluded Services	S3822	Single mutation analysis brst/ovar cancer	4/1/2003	3/31/2012
BENE - Maine Excluded Services	S3823	Three mutation BRCA1 & BRCA2, breast/ovar ca	4/1/2003	3/31/2012
BENE - Maine Excluded Services	S3828	Complete gene sequence analysis MLH1 gene	4/1/2003	3/31/2012
BENE - Maine Excluded Services	S3829	Complete gene sequence analysis MSH2 gene	4/1/2003	3/31/2012
BENE - Maine Excluded Services	S3830	Comp MLH1& MSH2 gene test HNPCC genetic test	1/1/2002	3/31/2012
BENE - Maine Excluded Services	S3831	Genetic test HNPCC single mutation analysis	1/1/2002	3/31/2012
BENE - Maine Excluded Services	S3833	Comp APC sequence analysis for suscepibil FAP	4/1/2003	12/31/2078
BENE - Maine Excluded Services	S3834	Single mutation analysis APC for suscepib FAP	4/1/2003	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S3835	Complete gene sequence test, cystic fibrosis	1/1/2002	3/31/2012
BENE - Maine Excluded Services	S3837	Gene sequence analysis for hemochromatosis	1/1/2002	3/31/2012
BENE - Maine Excluded Services	S3840	DNA analysis RET-oncogene to multiple endocrn	7/1/2003	12/31/2078
BENE - Maine Excluded Services	S3841	Genetic testing for retinoblastoma	7/1/2003	12/31/2078
BENE - Maine Excluded Services	S3842	Genetic testing for von Hippel-Lindau disease	7/1/2003	12/31/2078
BENE - Maine Excluded Services	S3843	DNA analysis F5 gene sus to F5 Leiden thrombo	7/1/2003	3/31/2012
BENE - Maine Excluded Services	S3844	DNA analys of connexin 26 gene for cong deaf	7/1/2003	12/31/2078
BENE - Maine Excluded Services	S3845	Genetic testing for alpha-thalassemia	7/1/2003	12/31/2078
BENE - Maine Excluded Services	S3846	Genetic testing hemoglobin E beta-thalassemia	7/1/2003	12/31/2078
BENE - Maine Excluded Services	S3847	Genetic testing for Tay-Sachs disease	7/1/2003	3/31/2012
BENE - Maine Excluded Services	S3848	Genetic testing for Gaucher disease	7/1/2003	3/31/2012
BENE - Maine Excluded Services	S3849	Genetic testing for Niemann-Pick disease	7/1/2003	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S3850	Genetic testing for sickle cell anemia	7/1/2003	12/31/2078
BENE - Maine Excluded Services	S3851	Genetic testing for Canavan disease	7/1/2003	3/31/2012
BENE - Maine Excluded Services	S3852	DNA analysis APOE eps for Alzheimer's disease	7/1/2003	12/31/2078
BENE - Maine Excluded Services	S3853	Genetic test for myotonic muscular dystrophy	1/1/2004	12/31/2078
BENE - Maine Excluded Services	S3854	Gene profile panel breast cancer treatment	1/1/2006	11/30/2018
BENE - Maine Excluded Services	S3855	Gene testing for presenilin-1 gene	1/1/2007	12/31/2078
BENE - Maine Excluded Services	S3860	genetic testing cardiac ion-comprehensive	10/1/2008	3/31/2012
BENE - Maine Excluded Services	S3861	genetic testing Brugada syndrome	10/1/2008	12/31/2078
BENE - Maine Excluded Services	S3862	genetic testing cardiac ion-specific	10/1/2008	3/31/2012
BENE - Maine Excluded Services	S3865	comprehensive gene test hyp cardiomyopathy	4/1/2009	12/31/2078
BENE - Maine Excluded Services	S3866	spec gene test hypertrophic cardiomyopathy	4/1/2009	12/31/2078
BENE - Maine Excluded Services	S3870	CGH test developmental delay	4/1/2009	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S3890	Fecal DNA analysis for colorectal cancer	4/1/2004	12/31/2078
BENE - Maine Excluded Services	S3900	Surface electromyography (EMG)	7/1/2001	12/31/2078
BENE - Maine Excluded Services	S3902	Ballistocardiogram	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S3904	Masters two step	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S3905	Auto handheld diagnostic nerve test	7/1/2007	3/31/2011
BENE - Maine Excluded Services	S4005	Interim labor facility global	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S4011	In Vitro Fertilization package	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S4013	Complete cycle, GIFT case rate	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S4014	Complete cycle, ZIFT case rate	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S4015	Complete in vitro fertilization case rate NOS	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S4016	Frozen in vitro fertilization case rate	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S4017	IVF incmplt cycle trtmnt cancel prior to stim	4/1/2002	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S4018	Frozen embryo transplnt cancelled case rate	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S4020	IVF canceled before aspiration case rate	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S4021	IVF canceled after aspiration case rate	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S4022	Assisted oocyte fertilization case rate	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S4023	Incomplete donor egg cycle case rate	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S4025	Donor services for IVF case rate	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S4026	Procurement of donor sperm from sperm bank	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S4027	Storage of previously frozen embryos	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S4028	Microsurgical epididymal sperm aspiration	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S4030	Sperm procurement & cryopreserv, initial visit	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S4031	Sperm procurement & cryopres, subsequent visit	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S4035	Stimulated intrauterine insemination, case rate	4/1/2002	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S4037	Cryopreserved embryo transfer, case rate	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S4040	Monitoring/storage cryopreserv embryo, 30 day	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S4042	Ovulation mgmt per cycle	1/1/2005	12/31/2078
BENE - Maine Excluded Services	S4981	Insertion levonorgestrel releasing IU system	7/1/2001	12/31/2078
BENE - Maine Excluded Services	S4989	Contraceptive IUD including implants supplies	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S4990	Nicotine patches legend	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S4991	Nicotine patches non-legend	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S4995	Smoking cessation gum	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S5000	Prescription drug, generic	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S5001	Prescription drug, brand name	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S5010	5% dextrose and 0.45% normal saline, 1000 ml	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S5011	5% dextrose in lactated ringer's, 1000 ml	1/1/2001	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S5012	5% dextrose with potassium chloride, 1000 ml	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S5013	5% dextrose/0.45% saline KCl, MGSO4, 1000 ml	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S5014	5% dextrose/0.45% saline KCl, MGSO4, 1500 ml	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S5035	Home infusion therapy, routine device maintnc	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S5036	Home infusion therapy, repair of infusion dev	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S5101	Adult day care services, per half day	1/1/2003	12/31/2078
BENE - Maine Excluded Services	S5105	Center-based day care services, per diem	1/1/2003	12/31/2078
BENE - Maine Excluded Services	S5108	Home care training to home care pt, per 15min	4/1/2003	12/31/2078
BENE - Maine Excluded Services	S5109	Home care training to home care pt, /session	4/1/2003	12/31/2078
BENE - Maine Excluded Services	S5110	Family home care training, per 15 minutes	1/1/2003	12/31/2078
BENE - Maine Excluded Services	S5111	Family home care training, per session	1/1/2003	12/31/2078
BENE - Maine Excluded Services	S5115	Nonfamily home care training, per 15 min	1/1/2003	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S5116	Nonfamily home care training, per session	1/1/2003	12/31/2078
BENE - Maine Excluded Services	S5121	Chore services, per diem	1/1/2003	12/31/2078
BENE - Maine Excluded Services	S5126	Attendant care services, per diem	1/1/2003	12/31/2078
BENE - Maine Excluded Services	S5131	Homemaker service NOS, per diem	1/1/2003	12/31/2078
BENE - Maine Excluded Services	S5135	Adult companion care, per 15 min	1/1/2003	12/31/2078
BENE - Maine Excluded Services	S5136	Adult companion care, per diem	1/1/2003	12/31/2078
BENE - Maine Excluded Services	S5141	Adult foster care, per month	1/1/2003	12/31/2078
BENE - Maine Excluded Services	S5145	Child foster care, therapeutic, per diem	1/1/2003	12/31/2078
BENE - Maine Excluded Services	S5146	Child foster care, therapeutic, per month	1/1/2003	12/31/2078
BENE - Maine Excluded Services	S5162	Emergency response system, purchase only	1/1/2003	12/31/2078
BENE - Maine Excluded Services	S5170	Home delivered meals including preparation	1/1/2003	5/31/2017
BENE - Maine Excluded Services	S5175	Laundry service, external, professional/order	1/1/2003	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S5180	Home health respiratory therapy, initial eval	1/1/2003	12/31/2078
BENE - Maine Excluded Services	S5181	Home health respiratory therapy NOS /day	1/1/2003	12/31/2078
BENE - Maine Excluded Services	S5185	Medication reminder services, per month	1/1/2003	12/31/2078
BENE - Maine Excluded Services	S5190	Wellness assessment performed by nonphysician	1/1/2003	12/31/2078
BENE - Maine Excluded Services	S5199	Personal care item NOS, each	1/1/2003	12/31/2078
BENE - Maine Excluded Services	S5497	Home infusion therapy, catheter care NOC	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S5498	Home infusion therapy, simple catheter care	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S5501	Home infusion therapy, complex catheter care	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S5502	Home infusion therapy, interim catheter care	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S5517	Home infusion therapy, declotting kit	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S5518	Home infusion therapy, catheter repair kit	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S5520	Home infusion therapy, PICC insertion kit	1/1/2002	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S5521	Home infusion therapy,midline cath insert kit	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S5522	Home infusion therapy,PICC insert no supplies	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S5523	HIT midline catheter insert kit no supplies	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S5550	Insulin rapid onset, 5 units	10/1/2003	12/31/2078
BENE - Maine Excluded Services	S5551	Insulin most rapid onset, 5 units	10/1/2003	12/31/2078
BENE - Maine Excluded Services	S5552	Insulin intermediate acting, 5 units	10/1/2003	12/31/2078
BENE - Maine Excluded Services	S5553	Insulin long acting, 5 units	10/1/2003	12/31/2078
BENE - Maine Excluded Services	S5560	Insulin delivery device resusable pen, 1.5 ml	10/1/2003	12/31/2078
BENE - Maine Excluded Services	S5561	Insulin delivery device resuasble pen, 3 ml	10/1/2003	12/31/2078
BENE - Maine Excluded Services	S5565	Insulin cartridge for use in insulin 150 unit	10/1/2003	12/31/2078
BENE - Maine Excluded Services	S5566	Insulin cartridge for use in insulin 300 unit	10/1/2003	12/31/2078
BENE - Maine Excluded Services	S5570	Insulin delivery device disposable pen 1.5 ml	10/1/2003	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S5571	Insulin delivery device disposable pen 3 ml	10/1/2003	12/31/2078
BENE - Maine Excluded Services	S8030	Tantalum ring application for localiza lesion	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S8032	Low dose CT lung cancer screening	10/1/2014	12/31/2078
BENE - Maine Excluded Services	S8035	Magnetic source imaging	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S8037	Magnetic resonance cholangiopancreatography	7/1/2001	4/30/2018
BENE - Maine Excluded Services	S8040	Topographic brain mapping	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S8042	Magnetic resonance imaging, low field	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S8049	Intraoperative radiation therapy	1/1/2000	3/31/2012
BENE - Maine Excluded Services	S8055	Ultrasound guidance multifetal preg reduction	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S8080	Scintimammography, unilateral includes supply	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S8085	Fluorine-18 fluorodeoxyglucose imaging	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S8092	Electron beam computed tomography	1/1/2000	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S8097	Asthma kit	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S8110	Peak expiratory flow rate (physician service)	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S8120	O2 contents gaseous 1 cubic ft equal 1 unit	10/1/2003	12/31/2078
BENE - Maine Excluded Services	S8121	O2 contents liquid 1 lb equals 1 unit	10/1/2003	12/31/2078
BENE - Maine Excluded Services	S8185	Flutter device	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S8186	Swivel adaptor	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S8189	Tracheostomy supply NOC	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S8210	Mucus trap	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S8262	Mandibular orthopedic repositioning device	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S8265	Haberman feeder for cleft lip/palate	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S8301	Infect control supplies NOS	7/1/2004	12/31/2078
BENE - Maine Excluded Services	S8415	Supplies for home delivery of infant	1/1/2002	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S8420	Custom gradient pressure aid sleeve & gloove	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S8421	Ready gradient pressure aid sleeve & gloove	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S8422	Custom gradient pressure aid sleeve made	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S8423	Custom gradient pressure aid sleeve heavy wgt	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S8424	Ready gradient pressure aid sleeve	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S8425	Custom gradient aid glove medium weight	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S8426	Custom gradient aid glove heavy weight	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S8427	Ready gradient pressure aid glove	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S8428	Ready gradient pressure aid gauntlet	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S8429	Gradient pressure exterior wrap	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S8430	Padding for compression bandage roll	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S8431	Compression bandage roll	1/1/2002	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S8450	Splint prefabricated digit	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S8451	Splint prefabricated wrist or ankle	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S8452	Splint prefabricated elbow	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S8460	Camisole post-mastectomy	4/1/2003	12/31/2078
BENE - Maine Excluded Services	S8490	100 insulin syringes	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S8940	Hippotherapy, per session	1/1/2005	12/31/2078
BENE - Maine Excluded Services	S8948	Low-level laser treatment, each 15 min	1/1/2004	12/31/2078
BENE - Maine Excluded Services	S8950	Complex lymphedema therapy, each 15 min	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S8999	Resuscitation bag	1/1/2001	6/3/2018
BENE - Maine Excluded Services	S9001	Home uterine monitor w/wo nursing services	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S9007	Ultrafiltration monitor	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S9015	Automated EEG monitoring	1/1/2001	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S9024	Paranasal sinus ultrasound	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S9025	Omnicardiogram/cardiointegram	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S9034	ESWL, for gallstones	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S9055	Procuren or other growth factor preparation	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S9056	Coma stimulation per diem	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S9061	Home admin of aerosolized drug therapy	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S9075	Smoking cessation treatment	1/1/2000	6/30/2011
BENE - Maine Excluded Services	S9083	Global fee urgent care centers	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9088	Services provided in urgent care center	1/1/2001	12/31/2078
BENE - Maine Excluded Services	S9090	Vertebral axial decompression, per session	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S9097	Home visit, wound care	7/1/2004	12/31/2078
BENE - Maine Excluded Services	S9098	Home visit, phototherapy services, per diem	1/1/2002	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S9109	CHF telemonitoring, equipment per month	1/1/2002	12/31/2012
BENE - Maine Excluded Services	S9117	Back school per visit	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9122	Home health aide/certified nurse asst per hr	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S9123	Nursing care, in the home, by RN, per hour	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S9124	Nursing care, in the home; by LPN, per hour	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S9125	Respite care, in the home, per diem	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S9126	Hospice care, in the home, per diem	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S9127	Social work visit, in the home, per diem	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S9128	Speech therapy, in the home, per diem	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S9129	Occupational therapy, in the home, per diem	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S9131	Physical therapy, in the home, per diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9140	Diabetic management program, follow-up non-MD	1/1/2000	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S9141	Diabetic management program, follow-up MD prov	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S9145	Insulin pump initiation, instruct initial use	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S9150	Evaluation by ophthalmologist	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S9208	Home management of preterm labor, per diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9209	Home management PPRM, per diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9211	Home management gestational htn per diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9212	Home mgt postpartum hypertension per diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9213	Home management of preeclampsia per diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9214	Home management gestational diabetes per diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9325	Home infusion therapy pain management per diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9326	Home infusion therapy cont pain mgt per diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9327	Home infusion therapy intermit pain mgt /diem	1/1/2002	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S9328	Home infusion therapy implt pump mgt per diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9329	Home infusion therapy chemotherapy per diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9330	Home infusion therapy cont chemothpy per diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9331	Home infusion therapy intermit chemo per diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9335	Home infusion therapy hemodialysis per diem	7/1/2003	12/31/2078
BENE - Maine Excluded Services	S9336	Home infusion therapy cont anticoag thpy/diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9338	Home infusion therapy immunotherapy per diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9339	Home infusion therapy pertoneal dialysis/diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9340	Home infusion therapy enteral nutr per diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9341	Home infusion therapy enteral nutr grav /diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9342	Home infusion therapy enteral nutr pump /diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9343	Home infusion therapy enteral nutr bolus/diem	1/1/2002	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S9345	Home infusion therapy antihemophilic agt/diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9346	Home infusion therapy alpha-1-proteinase/diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9347	Home infusion therapy longterm infusion /diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9348	Home infusion therapy sympathomim agent /diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9349	Home infusion therapy tocolytic thpy per diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9351	Home infusion therapy cont antiemetic /diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9353	Home infusion therapy continuous insulin/diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9355	Home infusion therapy chelation therapy /diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9357	Home infusion therapy enzyme replacement/diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9359	Home infusion therapy antitumor necrosis/diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9361	Home infusion therapy diuretic therapy /diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9363	Home infusion Tx, anti-spasmodic	1/1/2002	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S9364	Home infusion therapy TPN total per diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9365	Home infusion therapy TPN 1 liter per diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9366	Home infusion therapy TPN 2 liter per diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9367	Home infusion therapy TPN 3 liter per diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9368	Home infusion therapy TPN over 3 liter /diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9370	Home therapy inject, intermit antiemetic/diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9372	Home therapy inject, int anticoagulation/diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9373	Home infusion therapy hydration total /diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9374	Home infusion therapy hydration 1 liter /diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9375	Home infusion therapy hydration 2 liter /diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9376	Home infusion therapy hydration 3 liter /diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9377	Home infusion therapy hydration over 3lt/diem	1/1/2002	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S9379	Home infusion therapy NOC per diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9381	Home infusion therapy high risk area escort	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9401	Anticoagulation clinic, no lab, per session	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S9430	Pharmacy compounding/dispensing services	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S9433	Medical food oral 100% nutritional intake	1/1/2009	12/31/2078
BENE - Maine Excluded Services	S9436	Lamaze classes non-MD provider, per session	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S9437	Childbirth refresher classes non-MD per sessn	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S9438	Cesarean birth classes, non-MD, per session	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S9439	VBAC classes, non-physician, per session	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S9442	Birthing classes, non-MD, per session	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9443	Lactation classes, non-MD, per session	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9444	Parenting classes, non-MD, per session	4/1/2002	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S9445	Patient education NOC, non-MD, per session	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9446	Patient education NOC group, non-MD per sessn	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9447	Infant safety classes, non-MD, per session	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S9449	Weight management classes non-MD, per session	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S9451	Exercise classes, non-MD, per session	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S9452	Nutrition classes, non-MD, per session	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S9454	Stress management classes non-MD, per session	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S9455	Diabetic management program, group session	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S9460	Diabetic management program, nurse visit	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S9465	Diabetic management program, dietician visit	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S9470	Nutritional counseling, dietitian visit	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S9472	Cardiac rehabilitation program non-MD, /diem	1/1/2000	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S9473	Pulmonary rehabilitation program non-MD /diem	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S9474	Enterostomal therapy, RN certified, per diem	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S9475	Ambulatory setting substnce abuse trtmnt/diem	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S9476	Vestibular rehabilitation, non-MD, per diem	10/1/2003	12/31/2078
BENE - Maine Excluded Services	S9480	Intensive outpt sychiatric services, per diem	1/1/2000	6/7/2018
BENE - Maine Excluded Services	S9484	Crisis intervention mental health serv /hour	7/1/2002	11/19/2018
BENE - Maine Excluded Services	S9490	Home infusion therapy, corticosteroid/diem	7/1/2002	12/31/2078
BENE - Maine Excluded Services	S9494	Home infusion therapy, antibiotic total /diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9497	Home infusion therapy, antibiotic q3h /diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9500	Home infusion therapy, antibiotic q24h /diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9501	Home infusion therapy, antibiotic q12h /diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9502	Home infusion therapy, antibiotic q8h /diem	1/1/2002	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S9503	Home infusion therapy, antibiotic q6h /diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9504	Home infusion therapy, antibiotic q4h /diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9529	Venipuncture home/skilled nursing facility pt	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9537	Home therapy hematopoietic hormone injec/diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9538	Home transfusion of blood products /diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9542	Home injectable therapy NOC per diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9558	Home injectable therapy, growth hormone /diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9559	Home injectable therapy, interferon, per diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9560	Home injectable therapy, hormonal, per diem	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9562	Home injectable therapy, palivizumab,per diem	1/1/2003	12/31/2078
BENE - Maine Excluded Services	S9590	Home therapy, irrigation therapy, per diem	1/1/2003	12/31/2078
BENE - Maine Excluded Services	S9810	Home therapy, professional pharmacy NOC /hour	1/1/2002	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S9900	Christian Science Practitioner visit,per diem	7/1/2002	12/31/2078
BENE - Maine Excluded Services	S9901	Christian sci nurse visit, per hour	1/1/2015	12/31/2078
BENE - Maine Excluded Services	S9970	Health club membership, annual	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S9975	Transplant related lodging/meals/transp /diem	4/1/2002	12/31/2078
BENE - Maine Excluded Services	S9976	Lodging NOS per diem	4/1/2004	12/31/2078
BENE - Maine Excluded Services	S9977	Meals NOS per diem	4/1/2004	12/31/2078
BENE - Maine Excluded Services	S9981	Medical records copying fee, administrative	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9982	Medical records copying fee, per page	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9986	Not medically necessary service	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9988	Services provided as part of phase I trial	4/1/2004	12/31/2078
BENE - Maine Excluded Services	S9989	Services provided outside of US	1/1/2002	12/31/2078
BENE - Maine Excluded Services	S9990	Services provided as part of a phase II trial	1/1/2000	12/31/2078

MaineCare Excluded/Non-Covered List

Category	Service Code	Code Description	Effective Date	Termination Date
BENE - Maine Excluded Services	S9991	Services provided as part of phase III trial	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S9992	Transportation costs to/from trial location	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S9994	Lodging costs for clinical trial participant	1/1/2000	12/31/2078
BENE - Maine Excluded Services	S9996	Meals for clinical trial participant and comp	1/1/2000	12/31/2078