



TO: ActiveHealth  
FR: NQF GI/GU Project Staff  
RE: GI/GU Endorsement Maintenance Pilot Project: Stage two checklist  
DA: September 28, 2012

### [GI/GU Endorsement Maintenance Pilot Project, 2012](#)

Thank you for your participation and concept submission to the GI/GU Endorsement Maintenance Pilot Project. Please carefully review the instructions below for next steps.

#### **Preparation for submission of recommended concepts to stage two**

1. Keep in mind, while the measure submission forms for recommended concepts opens in early November, approval of concepts is finalized with Board of Directors approval on November 30.
2. Review all requirements for measure submission and criteria to be suitable for endorsement:
  - Consider and address harmonization issues for related concepts
    - #0399 - Hepatitis C: Hepatitis A Vaccination (Paired With #0400), AMA-PCPI
  - Ensure that evidence remains current and consistent with concept
    - Check if there have been any major changes in the evidence base supporting the approved concept. If yes, provide the citation and copy of the study or article and discuss the impact on the measure concept.
    - If there are any changes in the concept from that which was approved, identify those changes and discuss the relevance of the evidence to the approved concept and the updated concept.
  - Ensure that testing requirements have been satisfied
    - Testing requirements are available in the [Measure Testing Task Force report](#)
3. Review the Developer Guidebook for additional resources and information for preparing your stage two measure submission. The updated guidebook will be available once stage two submission forms are opened and will also be distributed by NQF Technical Assistance Staff.

4. **Notify NQF project staff by October 25, 2012** if you plan to submit full specifications and testing for approved concepts by the December 19, 2012 stage two measure submission deadline.
5. You will be required to submit at least one of your fully specified and tested measures on or prior to the **technical assistance deadline on December 3, 2012**, for a technical review for completeness and responsiveness by the NQF staff.
6. Measure submissions must be complete and responsive to ALL questions in order to be advanced to the Steering Committee for consideration and evaluation.

### Concept(s) Recommended for Approval: ActiveHealth

Provide a response for EACH Committee recommendation describing your rationale for implementing (or not) the recommendation and any additional considerations.

Upload this document to your online measure submission form for review by the Committee in stage two.

0622 GERD - Upper Gastrointestinal Study in Adults with Alarm Symptoms	
Committee Recommendations to Developer	Developer Response
This measure should include chronic GERD patients.	The denominator is defined for chronic GERD patients.
The exclusion should be clarified as previous malignancy.	The exclusion has been clarified as metastatic malignancy.
Barrett's esophagus should be included.	Barrett's esophagus has been removed from the denominator exclusions and those patients with Barrett's will be included if they meet the remaining denominator criteria.
The measure should be expanded to include patients under 18 as well; pediatric populations should be included as the same evidence applies.	The age band has been lifted to allow for patients of all ages.
Additional evidence should be provided for evidence criterion.	Completed. Please see evidence submission form in section 1c.28.
Additional information on performance gap is needed.	Please see section 3b.1
Define/specify the testing/procedures for the numerator more clearly.	Please see the Measure Testing Submission Form attachment

0622 GERD - Upper Gastrointestinal Study in Adults with Alarm Symptoms	
Consider also specifying the numerator in a patient population that would be more broadly impactful (e.g., ie. obese and/or male patients)	We have modified the measure so that it now has 2 separate numerators: one for the general population, and one for those patients at high risk. However, we have not tested this new algorithm because we strongly feel that separating the numerators in such a manner will lead to erroneous reporting. We strongly recommend separating these high risk individuals into another DENOMINATOR and reporting the 2 rates of compliance separately. We await feedback from the NQF on this suggestion. <b>Addendum 1/11/2012: After discussing with the NQF, we have separated the denominator in to an overall general population and a high risk population. Due to the lag and timing of the NQF's decision, testing this measure with the NEW denominator is currently under way. The testing results currently in the submission form reflect the original measure denominator.</b>



Measure Submission and Evaluation Worksheet 6.0

This form contains the information submitted by measure developers/stewards, organized according to NQF’s measure evaluation criteria and process. The evaluation criteria, evaluation guidance documents, and a blank online submission form are available on the [submitting standards web page](#).

NQF #: 0622	NQF Project: GI and GU Project
(for Endorsement Maintenance Review)	
Original Endorsement Date: Most Recent Endorsement Date: Evaluation Form Created: March 22, 2013	
<b>BRIEF MEASURE INFORMATION</b>	
De.1 Measure Title: GERD - Upper Gastrointestinal Study in Patients with Alarm Symptoms	
Co.1.1 Measure Steward: ActiveHealth Management	
De.2 Brief Description of Measure: The percentage of patients with in the overall and high risk population with gastroesophageal reflux disease (GERD) with alarm symptoms who have had an upper gastrointestinal study. (2 separate Denominators)	
2a1.1 Numerator Statement: Patients who have had at least least 1 esophageal procedure, upper GI study (Upper GI radiologic exam with high density barium, with or without delayed films, esophageal or gastric motility study, gastric emptying study, gastric analysis test, upper GI endoscopy, or upper GI series), or gastrectomy or evidence of at least 1 gastric or esophageal cancer diagnosis in the past 12 months. *Note-cancer diagnosis implies diagnostic testing was done, and therefore completes numerator	
2a1.4 Denominator Statement: Denominator 1:Patients with a diagnosis of chronic GERD with alarm symptoms (e.g., dysphagia, iron deficiency anemia, weight loss)in the past 12 months. Denominator 2:High risk patients (i.e., obese, male, or age > 50) with a diagnosis of GERD with alarm symptoms (i.e., dysphagia or weight loss) in the past 12 months	
2a1.8 Denominator Exclusions: Specific Exclusions: <ol style="list-style-type: none"> <li>1. Patients with esophageal varices.</li> <li>2. Patients with gastric restrictive procedures.</li> <li>3. Patients with weight loss surgery.</li> <li>4. 1. Patients with a metastatic malignancy,</li> </ol> General exclusions: <ol style="list-style-type: none"> <li>1. Evidence of metastatic disease or active treatment of malignancy (chemotherapy or radiation therapy) in the last 6 months</li> <li>2. Patients who have been in a skilled nursing facility in the last 3 months</li> <li>3. Patients who are terminally ill or in Hospice</li> </ol>	
1.1 Measure Type: Process	
2a1. 25-26 Data Source: Other, We allow data from several different sources including claims, health information exchanges, provider and patient surveys, our patient health portal, and through feedback given to our nurses via telephonic engagement. All data is processed through ActiveHealth Management’s clinical rule engine, CareEngine. Electronic clinical data source for pharmacy, lab, and EHR data is ActiveCareTeam (clinical workflow tool and dashboard) and MyActiveHealth (PHR). Healthcare provider surveys and patient surveys are included as a part of our clinical alerts (aka Care Considerations) feedback section. Patient self-reported data is included as a part of our patient portal (My ActiveHealth) and our disease management program (Active DM). The individual sources for this measure are not tested separately. We ingest and store all data in a centralized warehouse from multiple sources. All data sources are tested simultaneously.	

See Guidance for Definitions of Rating Scale: H=High; M=Moderate; L=Low; I=Insufficient; NA=Not Applicable

2a1.33 Level of Analysis: [Population : National](#)  
 1.2-1.4 Is this measure paired with another measure? [No](#)

De.3 If included in a composite, please identify the composite measure (*title and NQF number if endorsed*): [N/A](#)

## 1. IMPACT, OPPORTUNITY, EVIDENCE - IMPORTANCE TO MEASURE AND REPORT

Importance to Measure and Report is a threshold criterion that must be met in order to recommend a measure for endorsement. All three subcriteria must be met to pass this criterion. See [guidance on evidence](#).

*Measures must be judged to be important to measure and report in order to be evaluated against the remaining criteria. (evaluation criteria)*

1a. High Impact:     H  M  L  I

*(The measure directly addresses a specific national health goal/priority identified by DHHS or NPP, or some other high impact aspect of healthcare.)*

De.4 Subject/Topic Areas (*Check all the areas that apply*): [Gastrointestinal \(GI\) : Gastro-Esophageal Reflux Disease \(GERD\)/Peptic Ulcer, Gastrointestinal \(GI\)](#)

De.5 Cross Cutting Areas (*Check all the areas that apply*):

1a.1 Demonstrated High Impact Aspect of Healthcare:

[Affects large numbers; High resource use; Patient/societal consequences of poor quality](#)

1a.2 If "Other," please describe: [N/A](#)

1a.3 Summary of Evidence of High Impact (*Provide epidemiologic or resource use data*):

[Gastroesophageal reflux disease \(GERD\) is a condition when stomach contents are refluxed into the esophagus and result in troublesome symptoms \(e.g., heartburn or acid regurgitation\) or complications \(e.g., esophagitis, stricture\). GERD is a common disorder of the upper gastrointestinal tract and has an incidence of 10-38% in the western adult population. In 2004, 27 percent of elderly Medicare patients used GERD medications, spending a total of \\$5.6 billion \[1\]. Hospitalizations for esophageal disorders increased from 516,895 to 646,785 from 1998 to 2005. Alarming symptoms have been considered a marker suggesting complications of GERD or malignancy \[4,5\]. In 2005, 9.1 percent of hospitalizations with a primary GERD diagnosis had alarm symptoms, which are serious enough to warrant further exploration for esophageal disorders. In the same year, 4.2 percent of hospitalizations with a GERD diagnosis had an esophageal disorder. From 1998 to 2005, dysphagia, esophageal adenocarcinoma, and esophagitis were the fastest growing esophageal disorders with a GERD diagnosis, increasing by 264 percent, 195 percent, and 94 percent, respectively. The number of primary GERD hospitalizations with alarm symptoms increased by 39 percent since 1998 \[1\]. In a 2002 questionnaire study, the odds ratio of patients with dyspepsia and alarm symptoms for both gastrointestinal cancer and mortality over a 3-year period were significantly raised \[6\]. With the increase in incidence of esophageal adenocarcinoma and esophagitis, along with some evidence suggesting delays in cancer diagnosis due to failure to investigate patients with alarm features \[7,8\], the need for endoscopic evaluation upon such alarm symptoms in patients with GERD becomes more vital.](#)

1a.4 Citations for Evidence of High Impact cited in 1a.3:

1. [Zhao, Encinosa. AHRQ Statistical Brief: Gastroesophageal reflux disease \(GERD\) hospitalizations in 1998 and 2005](#)
2. [Nwokediuko. Gastroesophageal reflux disease: a population based study. Gastroenterology Research 2009;2\(3\):152-156](#)
3. [Pohl, Welch. The role of overdiagnosis and reclassification in the marked increase of esophageal adenocarcinoma incidence. J Natl Cancer Inst 2005 97\(2\):142-6](#)
4. [British Society of Gastroenterology. Dyspepsia management guidelines. London: British Society of Gastroenterology, 2002.](#)
5. [Talley NJ, Silverstein MD, Agraus L, et al. AGA technical review: evaluation of dyspepsia. American Gastroenterological Association. Gastroenterology 1998;114:582-95](#)
6. [Meineche-Schmidt V, Jorgensen T. "Alarm symptoms" in patients with dyspepsia: a three-year prospective study from](#)

See Guidance for Definitions of Rating Scale: H=High; M=Moderate; L=Low; I=Insufficient; NA=Not Applicable

general practice. Scand J Gastroenterol 2002;37:999-1007

7. Martin IG, Young S, Sue-Ling H, et al. Delays in diagnosis of oesophagogastric cancer: a consecutive case series. BMJ 1997;314:467-70

8. Christie J, Shepherd NA, Codling BW, et al. Gastric cancer below the age of 55: implications for screening patients with uncomplicated dyspepsia. Gut 1997;41:513-17

1b. Opportunity for Improvement: H  M  L  I

(There is a demonstrated performance gap - variability or overall less than optimal performance)

1b.1 Briefly explain the benefits (improvements in quality) envisioned by use of this measure:

This measure is aimed at optimizing the care and identifying complications of GERD in the presence of alarm symptoms. The principal reason to evaluate via endoscopy in patients with GERD and alarm symptoms is to detect structural abnormalities that may need additional diagnostic evaluation, evaluate the success of medical therapy, and for potential biopsy opportunities as part of a diagnostic differential for such symptomatology. This measure was developed with the goal to help reduce the progression of complicated esophageal diseases and investigate patients with a higher-risk of upper gastrointestinal malignancy.

1b.2 Summary of Data Demonstrating Performance Gap (Variation or overall less than optimal performance across providers):

[For Maintenance - Descriptive statistics for performance results for this measure - distribution of scores for measured entities by quartile/decile, mean, median, SD, min, max, etc.]

There are currently no large population studies summarizing the performance gap of upper endoscopy on GERD patients with alarm symptoms (i.e., either dysphagia or unintentional weight loss). From a test of this measure done on a sample population of 2.46 million, we found 392 patients with GERD AND either dysphagia or unintentional weight loss. Of these patients, 260 had an upper endoscopy performed during the measurement year. This translates to a performance gap of 33.7% [1].

1b.3 Citations for Data on Performance Gap: [For Maintenance - Description of the data or sample for measure results reported in 1b.2 including number of measured entities; number of patients; dates of data; if a sample, characteristics of the entities included]

2.46 million lives were included in the sample population, representing a cross-sectional nationwide sample from our client population, 49% male, 51% female, with an average age of 37 years. Test was performed in 2012. 392 patients had both GERD and at least one alarm symptom. 260 of these patients had an Upper GI study done.

1. ActiveHealth Management, Inc., testing done from June 3rd, 2009 to June 3rd, 2010, includes both commercial and Medicare population.

1b.4 Summary of Data on Disparities by Population Group (for example by race/ethnicity, gender, age, insurance status, socioeconomic status, and/or disability, etc. If you do not have data on your specific measure, perform a literature search/review and report data for the measure or similar appropriate concept.): [For Maintenance - Descriptive statistics for performance results for this measure by population group]

Most large population studies are done in Asian countries due to the higher rate of upper gastrointestinal malignancy; however there is insufficient data demonstrating the disparities between different population groups within the United States.

1b.5 Citations for Data on Disparities Cited in 1b.4: [For Maintenance - Description of the data or sample for measure results reported in 1b.4 including number of measured entities; number of patients; dates of data; if a sample, characteristics of the entities included]

No citations.

1c. Evidence (Measure focus is a health outcome OR meets the criteria for quantity, quality, consistency of the body of evidence.)

Is the measure focus a health outcome? Yes  No  If not a health outcome, rate the body of evidence.

Quantity: H  M  L  I  Quality: H  M  L  I  Consistency: H  M  L  I

Quantity	Quality	Consistency	Does the measure pass subcriterion 1c?
M-H	M-H	M-H	Yes <input type="checkbox"/>

L	M-H	M	Yes <input type="checkbox"/> IF additional research unlikely to change conclusion that benefits to patients outweigh harms: otherwise No <input type="checkbox"/>
M-H	L	M-H	Yes <input type="checkbox"/> IF potential benefits to patients clearly outweigh potential harms: otherwise No <input type="checkbox"/>
L-M-H	L-M-H	L	No <input type="checkbox"/>
Health outcome – rationale supports relationship to at least one healthcare structure, process, intervention, or service		Does the measure pass subcriterion 1c? Yes <input type="checkbox"/> IF rationale supports relationship	
<b>SEE ATTACHED EVIDENCE SUBMISSION FORM</b>			
Was the threshold criterion, <i>Importance to Measure and Report</i> , met? (1a & 1b must be rated moderate or high and 1c yes) Yes <input type="checkbox"/> No <input type="checkbox"/>			
Provide rationale based on specific subcriteria:			
<p style="color: red;">For a new measure if the Committee votes NO, then STOP.</p> <p style="color: red;">For a measure undergoing endorsement maintenance, if the Committee votes NO because of 1b. (no opportunity for improvement), it may be considered for continued endorsement and all criteria need to be evaluated.</p>			

**2. RELIABILITY & VALIDITY - SCIENTIFIC ACCEPTABILITY OF MEASURE PROPERTIES**

Extent to which the measure, as specified, produces consistent (reliable) and credible (valid) results about the quality of care when implemented. (evaluation criteria)  
 Measure testing must demonstrate adequate reliability and validity in order to be recommended for endorsement. Testing may be conducted for data elements and/or the computed measure score. Testing information and results should be entered in the appropriate field. Supplemental materials may be referenced or attached in item 2.1. See [guidance on measure testing](#).

**S.1 Measure Web Page** (*In the future, NQF will require measure stewards to provide a URL link to a web page where current detailed specifications can be obtained*). Do you have a web page where current detailed specifications for this measure can be obtained?  
[www.activehealth.com](http://www.activehealth.com)

**2a1.1 Numerator Statement** (*Brief, narrative description of the measure focus or what is being measured about the target population, e.g., cases from the target population with the target process, condition, event, or outcome*):  
 Patients who have had at least 1 esophageal procedure, upper GI study (Upper GI radiologic exam with high density barium, with or without delayed films, esophageal or gastric motility study, gastric emptying study, gastric analysis test, upper GI endoscopy, or upper GI series), or gastrectomy or evidence of at least 1 gastric or esophageal cancer diagnosis in the past 12 months. \*Note-cancer diagnosis implies diagnostic testing was done, and therefore completes numerator

**2a1.3 Numerator Details** (*All information required to identify and calculate the cases from the target population with the target process, condition, event, or outcome such as definitions, codes with descriptors, and/or specific data collection items/responses*):  
 Numerator: [for both the General Population and the High Risk]  
 One of the following:  
 1. Presence of at least 1 ESOPHAGEAL PROCEDURES procedure from claims or HIE in the past 12 months  
 2. Presence of at least 1 UPPER GI STUDY procedure from claims or HIE in the past 12 months  
 3. Presence of at least 1 GASTRECTOMY procedure from claims or HIE in the past 12 months  
 4. Presence of at least 1 CANCER GASTRIC diagnosis from claims or HIE in the past 12 months  
 5. Presence of at least 1 CANCER ESOPHAGEAL diagnosis from claims or HIE in the past 12 months  
 6. Presence of patient data via online PHR or telephonic nurse assessment confirming at least 1 PDD- EGD IN PAST 12 MTHS (OR UPPER GI STUDY) result in the past 12 months  
 (NOTE: Words written in capital letters are element names. Please refer to the code set for description.)

**2a1.4 Denominator Statement** (*Brief, narrative description of the target population being measured*):  
 Denominator 1: Patients with a diagnosis of chronic GERD with alarm symptoms (e.g., dysphagia, iron deficiency anemia, weight

loss)in the past 12 months.

Denominator 2:High risk patients (i.e., obese, male, or age > 50) with a diagnosis of GERD with alarm symptoms (i.e., dysphagia or weight loss) in the past 12 months

**2a1.5 Target Population Category** (Check all the populations for which the measure is specified and tested if any):

Senior Care

**2a1.7 Denominator Details** (All information required to identify and calculate the target population/denominator such as definitions, codes with descriptors, and/or specific data collection items/responses):

DENOMINATOR –1- General population

All of the following:

1. One of the following:

- a. Presence of at least 2 GERD INCLUDING BARRETT'S diagnosis from claims in the past 12 months
- b. Presence of at least 1 GERD INCLUDINGBARRETT'S diagnosis from HIE in the past 12 months
- c. Presence of patient data via online PHR or telephonic nurse assessment confirming at least 1 PDD- GERD in the past 12 months

2. One of the following:

- a. Presence of at least 2 WEIGHT LOSS diagnosis from claims or 1 WEIGHT LOSS diagnosis from HIE in the past 12 months
- b. Presence of at least 2 DYSPHAGIA diagnosis from claims or HIE in the past 12 months
- i. EXCLUSION: if the following is correct:Presence of at least 2 DYSPHAGIA - MISC. CAUSES diagnosis from claims or 1 DYSPHAGIA - MISC. CAUSES diagnosis from HIE in the past 12 months

c. Presence of patient data via online PHR or telephonic nurse assessment confirming at least 1 PDD- GERD WARNING SYMPTOMS result in the past 12 months

3. One of the following:

- a. Presence of at least 1 fill PUD/GERD DRUGS for 60 day total supply from claims in the past 12 months
- b. Presence of at least 1 fill PUD/GERD DRUGS drug from HIE in the past 12 months
- c. Presence of patient data via online PHR or telephonic nurse assessment confirming at least 1 fill PUD/GERD DRUGS drug in the past 12 months

DENOMINATOR – 2 - High Risk Patients with Alarm Symptoms

All of the following:

1. One of the following:

- a. Presence of at least two OBESITY diagnosis from claims in the past 12 months
- b. Presence of at least one OBESITY diagnosis from HIE in the past 12 months
- c. Presence of at least one disability claim for OBESITY filed in the past 12 months
- d. Presence of patient data via online PHR or telephonic nurse assessment confirming at least 1 PDD- OBESITY result in the past 12 months
- e. Patient is male
- f. Patient is over 50 years of age
- g. Presence of at least 1 MU BMI LOINC code for a BMI>=30 result from claims or HIE in the past 12 months
- h. Presence of patient data via online PHR or telephonic nurse assessment confirming PDD- BMI for most recent BMI>=30 result in the past 12 months
- i. Presence of at least 1 BMI>=30 diagnosis from claims or HIE in the past 12 months

2. One of the following:

- a. Presence of at least 2 GERD INCLUDING BARRETT'S diagnosis from claims in the past 12 months
- b. Presence of at least 1 GERD INCLUDING BARRETT'S diagnosis from HIE in the past 12 months
- c. Presence of patient data via online PHR or telephonic nurse assessment confirming a diagnosis of GERD in the past 12 months

3. One of the following:

- a. Presence of at least 2 WEIGHT LOSS diagnosis from claims or 1 WEIGHT LOSS diagnosis from HIE in the past 12 months
- b. Presence of at least 2 DYSPHAGIA diagnosis from claims or HIE in the past 12 months



- i. EXCLUSION: if the following is correct: Presence of at least 2 DYSPHAGIA - MISC. CAUSES diagnosis from claims or or 1 DYSPHAGIA - MISC. CAUSES diagnosis from HIE in the past 12 months
  - c. Presence of patient data via online PHR or telephonic nurse assessment confirming at least 1 PDD- GERD WARNING SYMPTOMS result in the past 12 months
  - 4. One of the following:
    - a. Presence of at least 1 fill PUD/GERD DRUGS for 60 day total supply from claims in the past 12 months
    - b. Presence of at least 1 fill PUD/GERD DRUGS from HIE in the past 12 months
    - c. Presence of patient data via online PHR or telephonic nurse assessment confirming 1 fill of PUD/GERD DRUGS in the past 12 months
- (NOTE: Words written in capital letters are element names. Please refer to the code set for description.)

**2a1.8 Denominator Exclusions** *(Brief narrative description of exclusions from the target population):*

**Specific Exclusions:**

- 1. Patients with esophageal varices.
- 2. Patients with gastric restrictive procedures.
- 3. Patients with weight loss surgery.
- 4. 1. Patients with a metastatic malignancy,

**General exclusions:**

- 1. Evidence of metastatic disease or active treatment of malignancy (chemotherapy or radiation therapy) in the last 6 months
- 2. Patients who have been in a skilled nursing facility in the last 3 months
- 3. Patients who are terminally ill or in Hospice

**2a1.9 Denominator Exclusion Details** *(All information required to identify and calculate exclusions from the denominator such as definitions, codes with descriptors, and/or specific data collection items/responses):*

**SPECIFIC DENOMINATOR EXCLUSIONS:**

One of the following:

- 1. Presence of at least 1 ESOPHAGEAL VARICES diagnosis from claims or HIE in the past 12 months
- 2. Presence of at least 1 GASTRIC RESTRICTIVE PROCEDURE procedure from claims or HIE anytime in the past
- 3. Presence of at least 1 WEIGHT LOSS SURGERY (ICD9) diagnosis from claims or HIE anytime in the past
- 4. Presence of at least 1 METASTATIC MALIGNANCY(INCL CHEMO/RADIATION) diagnosis from claims or HIE in the past 12 months
- 5. Presence of patient data via online PHR or telephonic nurse assessment confirming at least 1 PDD- GASTRIC BYPASS SURGERY result in the past 12 months

(NOTE: Words written in capital letters are element names. Please refer to the code set for description.)

**2a1.10 Stratification Details/Variables** *(All information required to stratify the measure results including the stratification variables, codes with descriptors, definitions, and/or specific data collection items/responses):*

This measure is not stratified.

**2a1.11 Risk Adjustment Type** *(Select type. Provide specifications for risk stratification in 2a1.10 and for statistical model in 2a1.13):* No risk adjustment or risk stratification 2a1.12 If "Other," please describe: N/A

**2a1.13 Statistical Risk Model and Variables** *(Name the statistical method - e.g., logistic regression and list all the risk factor variables. Note - risk model development should be addressed in 2b4.):*

N/A

**2a1.14-16 Detailed Risk Model Available at Web page URL** (or attachment). Include coefficients, equations, codes with descriptors, definitions, and/or specific data collection items/responses. Attach documents only if they are not available on a webpage and keep attached file to 5 MB or less. NQF strongly prefers you make documents available at a Web page URL. Please supply login/password if needed:

**2a1.17-18. Type of Score:**

Rate/proportion

If other: N/A

**2a1.19 Interpretation of Score** (Classifies interpretation of score according to whether better quality is associated with a higher score, a lower score, a score falling within a defined interval, or a passing score):

better quality = higher score

**2a1.20 Calculation Algorithm/Measure Logic**(Describe the calculation of the measure score as an ordered sequence of steps including identifying the target population; exclusions; cases meeting the target process, condition, event, or outcome; aggregating data; risk adjustment; etc.):

- 1.) Identify those patients who meet denominator criteria, e.g. have a diagnosis of chronic GERD AND who have evidence of a fill for PUD/GERD medication(s)AND who have evidence of warning signs, in the stated timeframe
- 2.) Subtract those patients who meet exclusionary criteria, e.g. have other of GERD alarm-like symptoms
- 3.) Identify those patients who meet the numerator criteria, e.g. who have evidence of an esophageal procedure, specified GI study, gastrectomy, or gastric or esophageal cancer in the specified timeframe.
- 4.) Divide the numerator by the denominator (minus the exclusions) and multiply by 100 to calculate measure score (percentage):  
Measure Score = [Numerator/(Denominator-Exclusions)] X 100

**2a1.21-23 Calculation Algorithm/Measure Logic Diagram URL or attachment:**

Included in attached appendix

**2a1.24 Sampling (Survey) Methodology.** If measure is based on a sample (or survey), provide instructions for obtaining the sample, conducting the survey and guidance on minimum sample size (response rate):

This measure is not based on a survey.

**2a1.25 Data Source** (Check all the sources for which the measure is specified and tested). If other, please describe:

Other

**2a1.26 Data Source/Data Collection Instrument** (Identify the specific data source/data collection instrument, e.g. name of database, clinical registry, collection instrument, etc.):

N/A

**2a1.27-29 Data Source/data Collection Instrument Reference Web Page URL or Attachment:**

We allow data from several different sources including claims, health information exchanges, provider and patient surveys, our patient health portal, and through feedback given to our nurses via telephonic engagement. All data is processed through ActiveHealth Management's clinical rule engine, CareEngine. Electronic clinical data source for pharmacy, lab, and EHR data is ActiveCareTeam (clinical workflow tool and dashboard) and MyActiveHealth (PHR). Healthcare provider surveys and patient surveys are included as a part of our clinical alerts (aka Care Considerations) feedback section. Patient self-reported data is included as a part of our patient portal (My ActiveHealth) and our disease management program (Active DM).

The individual sources for this measure are not tested separately. We ingest and store all data in a centralized warehouse from multiple sources. All data sources are tested simultaneously. Available at measure-specific web page URL identified in S.1

**2a1.30-32 Data Dictionary/Code Table Web Page URL or Attachment:**

Available in attached Excel or csv file

NOF\_622\_-\_CODE\_SET\_Revised\_1.8.13.xlsx

**2a1.33 Level of Analysis** (Check the levels of analysis for which the measure is specified and tested):

Population : National

2a1.34-35 Care Setting (Check all the settings for which the measure is specified and tested):

Other

If other: We do not differentiate between practice settings when testing the measures. All data is used agnostic of practice set

2a. RELIABILITY. Precise Specifications and Reliability Testing: H  M  L  I

2b. VALIDITY. Validity, Testing, including all Threats to Validity: H  M  L  I

2c. Disparities in Care: H  M  L  I  NA  (If applicable, the measure specifications allow identification of disparities.)

**SEE ATTACHED MEASURE TESTING FORM**

Steering Committee: Overall, was the criterion, *Scientific Acceptability of Measure Properties*, met? (Reliability and Validity must be rated moderate or high) Yes  No

Provide rationale based on specific subcriteria:

If the Committee votes No, STOP

### 3. USABILITY

Extent to which potential audiences (e.g., consumers, purchasers, providers, policymakers) are using or could use performance results for both accountability and performance improvement to achieve the goal of high-quality, efficient healthcare for individuals or populations. (evaluation criteria)

3.1 Current and Planned Use (NQF-endorsed measures are expected to be used in at least one accountability application within 3 years and publicly reported within 6 years of initial endorsement in addition to performance improvement.):

Current and Planned Use (check all the current and planned uses; for any current uses that are checked, provide a URL for the specific program)

Planned	Current	For current use, Provide URL
Public Reporting:Quality Improvement (Internal to the specific organization)		

3a. Accountability and Transparency: H  M  L  I

(Performance results are used in at least one accountability application within three years after initial endorsement and are publicly reported within six years after initial endorsement (or the data on performance results are available). If not in use at the time of initial endorsement, then a credible plan for implementation within the specified timeframes is provided.)

3a.1. For each CURRENT use, checked above, provide:

- Name of program and sponsor
- Purpose
- Geographic area and number and percentage of accountable entities and patients included

N/A

3a.2. If not currently publicly reported OR used in at least one other accountability application (e.g., payment program, certification, licensing) what are the reasons? (e.g., Do policies or actions of the developer/steward or accountable entities restrict access to performance results or block implementation?)

The ActiveHealth website has recently undergone a renovation to enhance its appearance and user experience. Our measures are an integral part of the ActiveHealth website and have undergone renovation as well. We have recently launched several of our measures on the quality measures web page and anticipate more robust reporting and other capabilities to be developed over the course of the next one to two years, as we fine tune our recent changes. While the measure specifications will be publicly available,

See Guidance for Definitions of Rating Scale: H=High; M=Moderate; L=Low; I=Insufficient; NA=Not Applicable

the performance results of individuals or organizations will not be reported due to proprietary reasons.

**3a.3 If not currently publicly reported OR used in at least one accountability application, provide a credible plan for implementation within the expected timeframes -- any accountability application within 3 years and publicly reported within 6 years of initial endorsement.** *(Credible plan includes the specific program, purpose, intended audience, and timeline for implementing the measure within the specified timeframes. A plan for accountability applications addresses mechanisms for data aggregation and reporting.)*

Within the next one to two years, performance results for this measure on a year to year basis will be available for public viewing on the ActiveHealth website. Calendar year data from our test population of over 20 million lives will be aggregated, reported, and displayed on our quality measure web page. While the measure specifications will be publicly available, the performance results of individuals or organizations will not be reported due to proprietary reasons.

**3b. Improvement:** H  M  L  I

(Progress toward achieving the goal of high-quality, efficient healthcare for individuals or populations is demonstrated. If not in use for performance improvement at the time of initial endorsement, then a credible rationale describes how the performance results could be used to further the goal of high-quality, efficient healthcare for individuals or populations.)

**3b.1. Provide data that demonstrate improvement in performance and/or health. (Not required for initial endorsement unless available.)**

Include:

- Source of Data
- Geographic area and number and percentage of accountable entities and patients included
- Progress (trends in performance results, number and percentage of people receiving high-quality healthcare)

For this measure examining the number of people with chronic GERD and alarm symptoms who had an appropriate GI study, we identified a total of 733 patients from our entire national book of business, who fulfilled the criteria for the denominator from 2002 to 2008. We found a compliance rate of 19% over a 6 year period from 2002 to 2008. In our 2011 test data alone, we identified 392 people who met the denominator criteria, 260 people who met the numerator criteria, and a compliance rate of 66%.

Addendum 1/11/2012: After discussing with the NQF, we have separated the denominator in to an overall general population and a high risk population. Due to the lag and timing of the NQF's decision, testing this measure with the NEW denominator is currently under way and will be available shortly. The testing and performance results currently in the submission form reflect the original measure denominator.

**3b.2. If no improvement was demonstrated, what are the reasons? If not in use for performance improvement at the time of initial endorsement, provide a credible rationale that describes how the performance results could be used to further the goal of high-quality, efficient healthcare for individuals or populations:**

N/A

**3c. Unintended Consequences:** H  M  L  I

(The benefits of the performance measure in facilitating progress toward achieving high-quality, efficient healthcare for individuals or populations outweigh evidence of unintended negative consequences to individuals or populations)

**3c.1. Were any unintended negative consequences to individuals or populations identified during testing; OR has evidence of unintended negative consequences to individuals or populations been reported since implementation? If so, identify the negative unintended consequences and describe how benefits outweigh them or actions taken to mitigate them.**

None

**Overall, to what extent was the criterion, Usability, met?** H  M  L  I

Provide rationale based on specific subcriteria:

#### 4. FEASIBILITY

Extent to which the required data are readily available, retrievable without undue burden, and can be implemented for performance measurement. (evaluation criteria)

4a. Data Generated as a Byproduct of Care Processes: H  M  L  I

4a.1-2 How are the data elements needed to compute measure scores generated? (Check all that apply).

Data used in the measure are:

generated by and used by healthcare personnel during the provision of care, e.g., blood pressure, lab value, medical condition;  
Coded by someone other than person obtaining original information (e.g., DRG, ICD-9 codes on claims)

4b. Electronic Sources: H  M  L  I

4b.1 Are the data elements needed for the measure as specified available electronically (Elements that are needed to compute measure scores are in defined, computer-readable fields):

ALL data elements are in defined fields in a combination of electronic sources

4b.2 If ALL data elements are not from electronic sources, specify a credible, near-term path to electronic capture, OR provide a rationale for using other than electronic sources:

N/A

4d. Data Collection Strategy/Implementation: H  M  L  I

4d.1 Describe what you have learned/modified as a result of testing and/or operational use of the measure regarding data collection, availability of data, missing data, timing and frequency of data collection, sampling, patient confidentiality, time and cost of data collection, other feasibility/implementation issues (e.g., fees for use of proprietary measures):

We use a combination of data sources to mitigate the risk of inaccuracies or errors. We recognize that generally, electronic data have inherent errors and inaccuracies related to incorrect coding, or missing data, which can result in less specificity in the definition of the denominator and /or the numerator. To minimize these errors and inaccuracies, we use clinically enriched data (laboratory results, medication lists) to augment the data. In addition, where possible, we corroborate the data. For example, to confirm a patient has diabetes, we not only confirm the presence of an ICD-9 code for diabetes from claims, we also substantiate this finding with the presence of diabetic medications. We have a mechanism in place to solicit feedback from providers via a feedback form, if they detect errors with the measure.

We do not anticipate significant unintended consequences from the implementation of this measure. Our measures are all developed from evidence-based literature or from clinical practice guidelines and are designed to encourage appropriate care of the patient.

4d.2 Describe any fees, licensing, or other requirements to use any aspect of the measure as specified (e.g., value/code set, risk model, programming code, algorithm):

None

Overall, to what extent was the criterion, *Feasibility*, met? H  M  L  I

Provide rationale based on specific subcriteria:

### OVERALL SUITABILITY FOR ENDORSEMENT

Does the measure meet all the NQF criteria for endorsement? Yes  No

Rationale:

If the Committee votes No, STOP.

If the Committee votes Yes, the final recommendation is contingent on comparison to related and competing measures.

### 5. COMPARISON TO RELATED AND COMPETING MEASURES

See Guidance for Definitions of Rating Scale: H=High; M=Moderate; L=Low; I=Insufficient; NA=Not Applicable

If a measure meets the above criteria and there are endorsed or new related measures (either the same measure focus or the same target population) or competing measures (both the same measure focus and the same target population), the measures are compared to address harmonization and/or selection of the best measure before a final recommendation is made.

5.1 If there are related measures (*either same measure focus or target population*) or competing measures (*both the same measure focus and same target population*), list the NQF # and title of all related and/or competing measures:

**5a. Harmonization**

5a.1 If this measure has EITHER the same measure focus OR the same target population as [NQF-endorsed measure\(s\)](#): Are the measure specifications completely harmonized?

5a.2 If the measure specifications are not completely harmonized, identify the differences, rationale, and impact on interpretability and data collection burden:

**5b. Competing Measure(s)**

5b.1 If this measure has both the same measure focus and the same target population as NQF-endorsed measure(s): Describe why this measure is superior to competing measures (*e.g., a more valid or efficient way to measure quality*); OR provide a rationale for the additive value of endorsing an additional measure. (*Provide analyses when possible*):

**CONTACT INFORMATION**

Co.1 Measure Steward (Intellectual Property Owner): [ActiveHealth Management](#)

Co.2 Point of Contact: [Bani | Vir | bvir@activehealth.net | 212-651-8200](#)

Co.3 Measure Developer if different from Measure Steward: [ActiveHealth Management](#)

Co.4 Point of Contact: [Bani | Vir | bvir@activehealth.net | 212-651-8200](#)

**ADDITIONAL INFORMATION**

**Workgroup/Expert Panel involved in measure development**  
 Ad.1 Provide a list of sponsoring organizations and workgroup/panel members' names and organizations. Describe the members' role in measure development.  
[Bani Vir, MD: Medical Director, Clinical Research & Development, ActiveHealth Management, Inc.](#)  
[Lindee Chin, MD: Medical Director, Clinical Research & Development, ActiveHealth Management, Inc.](#)  
[George Wu, MD: Medical Director, Clinical Research & Development, ActiveHealth Management, Inc.](#)  
[Rajesh Mehta, Director of Pharmacy Informatics, Clinical Research & Development, ActiveHealth Management, Inc.](#)  
[Flora Chang, PharmD, Director of Pharmacy Informatics, Clinical Research & Development, ActiveHealth Management.](#)  
[Judy Flood, Nurse Informatics QM Manager, Clinical Research & Development, ActiveHealth Management.](#)  
 ActiveHealth Management measures are developed by our [Quality Measures Management Committee](#), a division of the Clinical Research and Development Department, composed of physicians of varying specialties and pharmacists. This committee evaluates available clinical evidence guidelines, reliability of data from various sources, and the necessity to develop measures to help improve standards of healthcare.

**Measure Developer/Steward Updates and Ongoing Maintenance**  
 Ad.3 Year the measure was first released: [2008](#)  
 Ad.4 Month and Year of most recent revision: [12/2012](#)  
 Ad.5 What is your frequency for review/update of this measure? [Annually](#)

Ad.6 When is the next scheduled review/update for this measure? 12/2012
Ad.7 Copyright statement: This information, including any attachments hereto, is the sole, exclusive, proprietary and confidential property of ActiveHealth Management, Inc., and is for the exclusive use of The National Quality Forum. Any use, copying, disclosure, dissemination or distribution by anyone other than the National Quality Forum is strictly prohibited.
Ad.8 Disclaimers: N/A
Ad.9 Additional Information/Comments:
Date of Submission (MM/DD/YY): Jul 16, 2012

**NATIONAL QUALITY FORUM—Evidence (1c) Pilot Submission Form**

**Measure Title:** GERD - Upper Gastrointestinal Study in Patients with Alarm Symptoms

**Date of Submission:** [12/7/2012](#)

- Respond to all questions with answers immediately following the question.
- Maximum of 6 pages (*6 pages includes questions/instructions in the form*); minimum font size 11 pt
- All information needed to demonstrate meeting the [evidence criterion \(1c\)](#) must be in this form. An appendix of *supplemental* materials may be submitted, but there is no guarantee it will be reviewed.
- See NQF [guidance on evaluating evidence](#). Contact NQF staff for examples, resources, or questions.

**STRUCTURE-PROCESS-OUTCOME RELATIONSHIP**

**1c.1. This is a measure of:**

Outcome

- Health outcome: [2T](#)
- Intermediate clinical outcome: [2T](#)
- Process: [Upper gastrointestinal study in those patients with chronic GERD with alarm symptoms in order to identify high risk individuals](#)
- Structure: [2T](#)
- Other: [2T](#)

**HEALTH OUTCOME MEASURE** *If not a health outcome, skip to 1c.3*

*If the measure focus identified in 1c.1 is a health outcome, answer 1c.2 and 1c.2.1.*

**1c.2. Briefly state or diagram how the health outcome is related to at least one healthcare structure, process, intervention, or service.**

**1c.2.1. State the rationale supporting the relationship between the health outcome and at least one healthcare structure, process, intervention, or service.**

*Note: For health outcome measures, no further information is required*

**STRUCTURE, PROCESS, OR INTERMEDIATE OUTCOME MEASURE**

*If the measure focus identified in 1c.1 is a structure, process, or intermediate outcome answer all the following questions (except as indicated by skip pattern).*

**1c.3. Briefly state or diagram how the measure focus is related to desired health outcomes and proximity to desired health outcomes. (Do not summarize the evidence here.)**

High risk patients with GERD who present with dysphagia or unintentional weight loss → investigate by endoscopy → early identification of complicated esophageal diseases (e.g., strictures, malignancies), evaluate the long-term success of existing GERD therapy, and for potential biopsy opportunities as part of a diagnostic differential.



**1c.4.** Is there a guideline recommendation supporting the measure focus identified in 1c.1.? Yes  No   
**If no, skip to #1c.6**

**If yes, answer 1c.4.1-1c.5.**

**1c.4.1. Guideline citation (including date):**

*American Gastroenterological Association Institute Technical Review on the Management of Gastroesophageal Reflux Disease*  
Gastroenterology 2008;135:1392-1413

*American Society for Gastrointestinal Endoscopy Guideline: Role of endoscopy in the management of GERD*  
Gastrointestinal Endoscopy 2007;66(2):219-224

**1c.4.2. URL (if available online):**

<http://gastro.ucsd.edu/fellowship/materials/Documents/GERD/AGA%20guidelines%20on%20management%5B1%5D.pdf>

<http://www.asge.org/WorkArea/showcontent.aspx?id=4182>

**1c.4.3. Identify guideline number and/or page number:**

Page 1397 for American Gastroenterological Association Institute Technical Review on the Management of Gastroesophageal Reflux Disease  
Page

**1c.4.4. Quote verbatim, the specific guideline recommendation:**

*American Gastroenterological Association Institute Technical Review on the Management of Gastroesophageal Reflux Disease*

interval, 55%–79%), respectively. Individual alarm features with the best performance were weight loss, dysphagia, and epigastric mass on examination. Given those numbers, and viewing this as a screening test rather than a diagnostic test, it seems reasonable that patients being evaluated for GERD should be queried regarding dysphagia and weight loss and examined for an epigastric mass. If judged significant, any of these should be evaluated with endoscopy (USPSTF grade B, quality fair).

*American Society for Gastrointestinal Endoscopy Guideline: Role of endoscopy in the management of GERD*

The indications for EGD in patients with GERD are listed in Table 2. Endoscopy should also be considered

**TABLE 2. Indications for endoscopy in patients with GERD**

GERD symptoms that are persistent or progressive despite appropriate medical therapy

Dysphagia or odynophagia

Involuntary weight loss > 5%

Evidence of GI bleeding or anemia

Finding of a mass, stricture, or ulcer on imaging studies

Evaluation of patients with suspected extra-esophageal manifestations of GERD

Screening for BE in selected patients (as clinically indicated)

Persistent vomiting

Evaluation of patients with recurrent symptoms after endoscopic or surgical antireflux procedures

- Endoscopy is recommended for patients who have symptoms suggesting complicated GERD or alarm symptoms (2A).

**1c.4.5. Grade assigned to the recommendation with definition of the grade:**

*American Gastroenterological Association Institute Technical Review on the Management of Gastroesophageal Reflux Disease*

Grade B, quality fair

*American Society for Gastrointestinal Endoscopy Guideline: Role of endoscopy in the management of GERD*

Grade 2A

**1c.5. Did the guideline developer systematically review and grade the body of evidence for the specific guideline recommendation? Yes  No  *If no, skip to #1c.6***

*If yes, answer 1c.5.1. (Note: Findings of the systematic review of the body of evidence for the guideline recommendation must be reported in 1c.8-1c.13.)*

**1c.5.1. Grade assigned to the body of evidence with definition of the grade:**

Grade B, quality fair

**1c.6. Is there another published systematic review of the body of evidence supporting the measure focus identified in 1c.1? (other than from the guideline cited above, e.g., Cochrane, AHRQ, USPSTF)**

Yes  No  *If no, skip to #1c.7*

*If yes, answer 1c.6.1-1c.6.3. (Note: Findings of the systematic review of the body of evidence must be reported in 1c.8-1c.13.)*

**1c.6.1. Citation (including date):**

University of Michigan Health System. *Gastroesophageal reflux disease (GERD)*. Ann Arbor (MI): University of Michigan Health System; 2012 May. 12

1c.6.2. URL (if available online):

<http://www.med.umich.edu/1info/fhp/practiceguides/gerd/gerd.12.pdf>

1c.6.3. Grade assigned to the body of evidence with definition of the grade:

1C

**If a systematic review of the evidence was identified in either 1c.5 or 1c.6, skip to 1c.8**

**1c.7. If a systematic review of the body of evidence was not identified and reported in 1c.5 or 1c.6, did the measure developer perform a systematic review of the body of evidence supporting the measure focus identified in 1c.1? Yes  No**

*If yes, answer 1c.7.1-1c.7.3. (Note: Findings of the measure developer's systematic review of the body of evidence must be reported in 1c.8-1c.13 and unpublished evidence review products such as evidence tables provided in an appendix.)*

**1c.7.1. Who conducted the measure developer's systematic review of the body of evidence?**

1c.7.2. Grade assigned to the body of evidence with definition of the grade:

1c.7.3. Describe the process used for the systematic review:

**If no systematic review of the body of evidence identified in 1c.5, 1c.6, or 1c.7, the evidence criterion can not be met.**

#### **FINDINGS FROM SYSTEMATIC REVIEW OF BODY OF THE EVIDENCE SUPPORTING THE MEASURE FOCUS**

*(Items 1c.8-1c.13 must be answered and should support the measure focus identified in 1c.1. If more than one systematic review was identified (1c.5, 1c.6, and 1c.7), provide a separate response for each.)*

**1c.8. What is the time period covered by the body of evidence? (provide the date range, e.g., 1990-2010). Date range: 1966-2012**

#### **QUANTITY AND QUALITY OF BODY OF EVIDENCE**

**1c.9. How many and what type of study designs are included in the body of evidence? (e.g., 3 randomized controlled trials and 1 observational study)**

1 meta-analysis, 20 prospective evaluations and 3 retrospective reviews.

**Listed below:**

1. Kapoor N, Bassi A, Sturgess R, Bodger K. Predictive value of alarm features in a rapid access upper gastrointestinal cancer service. *Gut* 2005;54:40-45.
2. Voutilainen M, Mantynen T, Kunnamo I, Juhola M, Mecklin J-P, Farkkila M. Impact of clinical features and referral volume on endoscopy for detecting peptic ulcer and gastric neoplasms. *Scand J Gastroenterol* 2003;38:109-113.

3. Numans ME, van der Graaf Y, de Wit NJ, de Melker RA. How useful is selection based on alarm features in requesting gastroscopy? *Scand J Gastroenterol* 2001;36:437–443.
4. Hassan C, Bersani G, Buri L, Zullo A, Anti M, Bianco MA, et al. Appropriateness of upper-GI endoscopy: an Italian survey on behalf of the Italian Society of Digestive Endoscopy. *Gastrointest Endosc.* 2007;65:767-74
5. Keren D, Rainis T, Stermer E, Lavy A. A nine-year audit of open-access upper gastrointestinal endoscopic procedures: results and experience of a single centre. *Can J Gastroenterol.* 2011;25:83-8
6. Lieberman D, Fennerty MB, Morris CD, Holub J, Eisen G, Sonnenberg A. Endoscopic evaluation of patients with dyspepsia: results from the National Endoscopic Data Repository. *Gastroenterology* 2004;127:1067–1075.
7. Adang RP, Vismans JFJ, Talmon JL, Hasman A, Ambergen AW, Stockbrugger RW. Appropriateness of indication for diagnostic upper gastrointestinal endoscopy: association with relevant endoscopic disease. *Gastrointest Endosc* 1995;42:390–397.
8. Vakil N, Moayyedi P, Fennerty, BM, Tally NJ. Limited Value of Alarm Features in the Diagnosis of Upper Gastrointestinal Malignancy: Systemic Review and Meta-analysis. *Gastroenterol* 2006;131:390-401
9. Krishnamurthy C, Hilden K, Peterson KA, Mattek N, Adler DG, Fang JC. Endoscopic findings in patients presenting with dysphagia: analysis of a national endoscopy database. *Dysphagia.* 2012;27:101-5
10. Bytzer P, Schaffalitzky de Muckadell OB. Prediction of major pathological conditions in dyspeptic patients referred for endoscopy. A prospective validation study of a scoring system. *Scand J Gastroenterol* 1992;27:987–992.
11. Bytzer P, Hansen JM, Havelund T, Malchow-Moller A, Schaffalitzky de Muckadell OB. Predicting endoscopic diagnosis in the dyspeptic patient: the value of clinical judgement. *Eur J Gastroenterol Hepatol* 1996;8:359–363.
12. Heikkinen M, Pikkarainen P, Eskelinen M, Julkunen R. GP's ability to diagnose dyspepsia based only on physical examination and patient history. *Scand J Prim Health Care* 2000;18:99–104.
13. Manes G, Balzano A, Marone P, Lionello M, Mosca S. Appropriateness and diagnostic yield of upper gastrointestinal endoscopy in an open-access endoscopy system: a prospective observational study based on the Maastricht guidelines. *Aliment Pharmacol Ther* 2002;16:105–110.
14. Meineche-Schmidt V, Jorgensen T. "Alarm features" in patients with dyspepsia: a three-year prospective study from general practice. *Scand J Gastroenterol* 2002;37:999–1007.
15. Sung JJY, Lao WC, Lai MS, Li TH, Chan FKL, Wu JCY, Leung VKS, Luk YW, Kung NNS, Ching JYL, Leung WK, Lau J, Chung SJY. Incidence of gastroesophageal malignancy in patients with dyspepsia in Hong Kong: implications for screening strategies. *Gastrointest Endosc* 2001;54:454–458.
16. Fjosne U, Kleveland PM, Waldum H, Halvorsen T, Petersen H. The clinical benefit of routine upper gastrointestinal endoscopy. *Scand J Gastroenterol* 1986;21:433–440.
17. Hansen JM, Bytzer P, Schaffalitzky de Muckadell OB. Management of dyspeptic patients in primary care. Value of unaided clinical diagnosis and of dyspepsia subgrouping. *Scand J Gastroenterol* 1998;33:799–805.
18. Rossi A, Bersani G, Ricci G, Defabritiis G, Pollino V, Suzzi A, et al. ASGE guidelines for the appropriate use of upper endoscopy: association with endoscopic findings. *Gastrointest Endosc.* 2002;56:714-9

19. Charles RJ, Cooper GS, Wong RC, Sivak MV Jr, Chak A. Effectiveness of open-access endoscopy in routine primary-care practice. *Gastrointest Endosc.* 2003;57:183-6
20. Mann J, Holdstock G, Harman M, Machin D, Loehry CA. Scoring system to improve cost effectiveness of open access endoscopy. *BMJ* 1983;287:937-940.
21. Holdstock G, Harman M, Machin D, Patel C, Lloyd RS. Prospective testing of a scoring system designed to improve case selection for upper gastrointestinal investigation. *Gastroenterology* 1986;90:1164-1169.
22. Thomson ABR, Barkun AN, Armstrong D, Chiba N, White RJ, et al. The prevalence of clinically significant endoscopic findings in primary care patients with uninvestigated dyspepsia: the Canadian Adult Dyspepsia Empiric Treatment-Prompt Endoscopy (CADET-PE) study. *Aliment Pharmacol Ther* 2003;17:1481-1491.
23. Crean GP, Holden RJ, Knill-Jones RP, Beattie AD, James WB, Marjoribanks FM, Spiegelhalter DJ. A database on dyspepsia. *Gut* 1994;35:191-202.
24. Johannessen T, Petersen H, Kleveland PM, Dybdahl JH, Sandvik AK, Brenna E, et al. The predictive value of history in dyspepsia. *Scand J Gastroenterol* 1990;25:689-697.

**1c.10. What is the overall quality of evidence across studies in the body of evidence? (discuss the certainty or confidence in the estimates of effect due to study factors such as design flaws, imprecision due to small numbers, indirectness of studies to the measure focus or target population)**

The overall quality of evidence across studies in the body of evidence is fair. Most studies are prospective evaluations; however there are intrinsic heterogeneity in the study results due to the varying prevalence of upper GI malignancy, the alarm symptoms that were reviewed, and the complications reported. Second, there are varying thresholds for the determination of whether alarm features were present. Third, other factors and limitations for the studies include the different clinical settings and types of patients that were included in the various articles, the fact that alarm symptoms may not be a primary outcome for some of the studies, and limited number of studies that reviewed particular alarm symptoms. In this case would be dysphagia and weight loss, which have the highest likelihood ratio amongst all of the alarm symptoms. Last, some studies derived results from computational scoring systems and some from clinical evaluations, which contribute to the heterogeneity of the evidence. Despite these limitations, the American Gastroenterological Association still deem dysphagia and weight loss as acceptable screening criteria for patients with chronic GERD.

**ESTIMATES OF BENEFIT AND CONSISTENCY ACROSS STUDIES IN BODY OF EVIDENCE**

**1c.11. What are the estimates of benefit—magnitude and direction of effect on outcome(s) across studies in the body of evidence? (e.g., ranges of percentages or odds ratios for improvement/decline across studies, results of meta-analysis, and statistical significance)**

Upon review of the two specific alarm features, namely weight loss and dysphagia, the positive likelihood ratios range from 1.9 to 21.2 across the various studies reviewed in this analysis.

**1c.12. What harms were studied and how do they affect the net benefit—benefits over harms?**

Upper endoscopy is a low-risk procedure. Complications include perforation, cardiovascular events, and death, however the risks are very low, ranging from 1 in 1000 to 1 in 10000.

**UPDATE TO THE SYSTEMATIC REVIEW(S) OF THE BODY OF EVIDENCE**

**1c.13. Are there new studies that have been conducted since the systematic review(s) of the body of evidence? Yes  No  *If no, stop***

If yes,

**1c.13.1. For each new study provide: 1) citation, 2) description, 3) results, 4) impact on conclusions of systematic review.**

The American College of Physicians has recently published best practice guidelines supporting our measure. This is the citation:

CLINICAL GUIDELINE



## Upper Endoscopy for Gastroesophageal Reflux Disease: Best Practice Advice From the Clinical Guidelines Committee of the American College of Physicians

Nicholas J. Shaheen, MD, MPH; David S. Weinberg, MD, MSc; Thomas D. Denberg, MD, PhD; Roger Chou, MD; Amir Qaseem, MD, PhD, MHA; and Paul Shekelle, MD, PhD, for the Clinical Guidelines Committee of the American College of Physicians\*

**Background:** Upper endoscopy is commonly used in the diagnosis and management of gastroesophageal reflux disease (GERD). Evidence demonstrates that it is indicated only in certain situations, and inappropriate use generates unnecessary costs and exposes patients to harms without improving outcomes.

**Methods:** The Clinical Guidelines Committee of the American College of Physicians reviewed evidence regarding the indications for, and yield of, upper endoscopy in the setting of GERD, and to highlight how clinicians can increase the delivery of high-value health care.

**Best Practice Advice 1:** Upper endoscopy is indicated in men and women with heartburn and alarm symptoms (dysphagia, bleeding, anemia, weight loss, and recurrent vomiting).

**Best Practice Advice 2:** Upper endoscopy is indicated in men and women with:

Typical GERD symptoms that persist despite a therapeutic trial of 4 to 8 weeks of twice-daily proton-pump inhibitor therapy.

Severe erosive esophagitis after a 2-month course of proton-pump inhibitor therapy to assess healing and rule out Barrett

esophagus. Recurrent endoscopy after this follow-up examination is not indicated in the absence of Barrett esophagus.

History of esophageal stricture who have recurrent symptoms of dysphagia.

**Best Practice Advice 3:** Upper endoscopy may be indicated:

In men older than 50 years with chronic GERD symptoms (symptoms for more than 5 years) and additional risk factors (nocturnal reflux symptoms, hiatal hernia, elevated body mass index, tobacco use, and intra-abdominal distribution of fat) to detect esophageal adenocarcinoma and Barrett esophagus.

For surveillance evaluation in men and women with a history of Barrett esophagus. In men and women with Barrett esophagus and no dysplasia, surveillance examinations should occur at intervals no more frequently than 3 to 5 years. More frequent intervals are indicated in patients with Barrett esophagus and dysplasia.

*Ann Intern Med.* 2012;157:808-816.

For author affiliations, see end of text.

[www.annals.org](http://www.annals.org)

**Measure Testing to Demonstrate Scientific Acceptability of Measure Properties**

**Measure Title:** GERD - Upper Gastrointestinal Study in Patients with Alarm Symptoms

**Date of Submission:** 2/1

**Type of Measure:**

<input type="checkbox"/> Composite	<input type="checkbox"/> Outcome
<input type="checkbox"/> Cost/resource	<input checked="" type="checkbox"/> Process
<input type="checkbox"/> Efficiency	<input type="checkbox"/> Structure

This Word document template must be used to submit information for measure testing.

- For **all** measures, sections **1, 2a2, 2b2, 2b3, 2b5** must be completed
- For **outcome or resource use** measures, section **2b4** also must be completed
- If specified for **multiple data sources** (e.g., claims and medical records), section **2b6** also must be completed
- Respond to **all** questions with answers immediately following the question (*unless meet the skip criteria or those that are indicated as optional*).
- Maximum of 10 pages (*including questions/instructions; do not change margins or font size; contact project staff if need more pages*)
- All information on testing to demonstrate meeting the [criteria for scientific acceptability of measure properties \(2a,2b\)](#) must be in this form. An appendix for *supplemental* materials may be submitted, but there is no guarantee it will be reviewed.

**1. DATA/SAMPLE USED FOR ALL TESTING OF THIS MEASURE**

*Often the same data are used for all aspects of measure testing. In an effort to eliminate duplication, the first five questions apply to all measure testing. If there are differences by aspect of testing, (e.g., reliability vs. validity) be sure to indicate the specific differences in question 7.*

**1.1. What type of data was used for testing?** (*Check all the sources of data identified in the measure specifications and data used for testing the measure. Testing must be provided for all the types of data specified and intended for measure implementation*)

Measure Specified to Use Data From:	Measure Tested with Data From:
<input type="checkbox"/> abstracted from paper record	<input type="checkbox"/> abstracted from paper record
<input type="checkbox"/> administrative claims	<input type="checkbox"/> administrative claims
<input type="checkbox"/> clinical database/registry	<input type="checkbox"/> clinical database/registry
<input type="checkbox"/> abstracted from electronic health record	<input type="checkbox"/> abstracted from electronic health record
<input type="checkbox"/> eMeasure implemented in electronic health record	<input type="checkbox"/> eMeasure implemented in electronic health record
<input checked="" type="checkbox"/> <b>other:</b> We ingest and store data in a centralized warehouse from multiple sources, e. g., administrative claims (including procedure, diagnosis, pharmacy, and lab), electronic clinical data, patient data from electronic personal health records and feedback, provider survey.	<input checked="" type="checkbox"/> <b>other:</b> The individual sources for this measure are not tested separately. We ingest and store data in a centralized warehouse from multiple sources, e. g., administrative claims (including procedure, diagnosis, pharmacy, and lab), electronic clinical data, patient data from electronic personal health records and feedback, provider survey. All data sources are tested simultaneously

**1.2. If used an existing dataset, identify the specific dataset** (*the dataset used for testing must be consistent with the measure specifications for target population and healthcare entities being measured; e.g., Medicare Part A claims, Medicaid claims, other commercial insurance, nursing home MDS, home health OASIS, clinical registry*).

All the data for the measures are obtained from electronic sources. We ingest administrative claims data, pharmacy-based management systems, laboratory systems, personal health records, health risk assessments, and electronic health records. In addition, we use data from care management systems. All data feeds are electronic and do not require manual medical chart abstraction.

We have over 20 million patient records in our database, consisting of data from provider organizations, hospital systems, healthcare plans, and Medicare and Medicaid. The mean age of the population is 37, and 51% of the population is female.

**1.3. What are the dates of the data used in testing?** 2T

Data abstraction was performed in 2012.

**1.4. What levels of analysis were tested?** (*testing must be provided for all the levels specified and intended for measure implementation, e.g., individual clinician, hospital, health plan*)

individual clinician    group/practice    hospital/facility/agency    health plan  
 other: Population level/National

**1.5. How many and which measured entities were included in the testing and analysis (by level of analysis and data source)?** (*identify the number and descriptive characteristics of measured entities included in the analysis (e.g., size, location, type); if a sample was used, describe how entities were selected for inclusion in the sample*)

We tested this measure on data from 2, 459, 974 patients from a major national commercial health plan, a large national employer based in Texas and Oklahoma, and a state health plan in the Appalachian region of the Southern US, which represent a subset of our total population. The total test population of the commercial health plan was 2,104,194. The total test population of the national employer was 161, 873. The total test population of the state health plan was 193, 097. The average age of the overall test population was 35 years and 52 percent were female. Using our complex algorithms, we were able to identify a subset of the test population who met the criteria for the denominator (e.g., people with chronic GERD and alarm symptoms), numerator (those who had an appropriate GI evaluation done), and exclusions (see algorithm for details).

**1.6. How many and which patients were included in the testing and analysis (by level of analysis and data source)?** (*identify the number and descriptive characteristics of patients included in the analysis*)



(e.g., age, sex, race, diagnosis); if a sample was used, describe how patients were selected for inclusion in the sample)

We tested this measure on data from 2, 459, 974 patients from a major national health plan, a large national employer, and a state health plan, which represent a subset of our total population. The total test population of the commercial health plan was 2,104,194. The total test population of the national employer was 161, 873. The total test population of the state health plan was 193, 097. In our past experience, this particular subset represents, both demographically and clinically, an accurate cross-section of our overall population of over 20 million lives. Our test population is selected randomly. The average age of the population was 35 years and 52 percent were female. The race of the individuals in our test population was not specified. The test population could have any number of diagnoses. Our rules algorithm determined if an individual met the denominator, numerator, and exclusion criteria.

**1.7. If there are differences in the data or sample used for different aspects of testing (e.g., reliability, validity, exclusions, risk adjustment), identify how the data or sample are different for each aspect of testing reported below.**

N/A

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After discussing with the NQF, we have separated the denominator in to an overall general population and a high risk population. Due to the lag and timing of the NQF's decision, testing this measure with the NEW denominator is currently under way. The testing results currently in the submission form reflect the original measure denominator.

## 2a2. RELIABILITY TESTING

**Note:** If accuracy/correctness (validity) of data elements was empirically tested, separate reliability testing of data elements is not required – report validity of data elements in 2b2

**2a2.1. What level of reliability testing was conducted?** (may be one or both levels)

Critical data elements used in the measure (e.g., inter-abstractor reliability)

Performance measure score (e.g., signal-to-noise)

**2a2.2. For each level checked above, describe the method of reliability testing and what it tests**

(describe the steps—do not just name a method; what type of error does it test; what statistical analysis was used)

All of our quality measures are electronic and all of the data used to support the measures are electronic. In addition, we receive the data by electronic feeds. We have internal processes to ensure that we receive valid codes and where appropriate the associated values. Our analytic process includes testing a new rule or algorithm on our test database, so that we can be sure of the reliability of the codes.

At the end of the test, we randomly select patients who are either in the numerator, or in the denominator but not the numerator, and review their individual electronic data to ensure that they met the requirements of the rule. As a part of our reliability testing, we check to ensure that we have found the correct people in the denominator or the numerator, across multiple rules with similar definitions. To ensure accuracy, we check a subset of the people who were not in the numerator to ensure that we were accurate in not counting them in the

numerator. If we find errors at any stage of the reliability testing, e.g., similar denominators that had significant differences in counts, different compliance rates for similar populations; we update the rules and retest.

**2a2.3. For each level checked above, what were the statistical results from reliability testing?** (e.g., percent agreement and kappa for the critical data elements; distribution of reliability statistics from a signal-to-noise analysis and association with case volume)

The average proportion of members that had GERD with alarm symptoms and the appropriate upper GI study across the 3 populations that we tested was 70.3%. The Standard Deviation was 15.5%. The signal to noise ratio is 5.

1. The proportion of patients within each client group with diagnosis/procedure claims in the last 365 days was: median 53% (IQR = 10%).
2. The proportion of patients within each client group with at least 1 prescription in the last 365 days was: median 81% (IQR = 8%).
3. The proportion of patients within each client group with lab results in the last 365 days was: median 46% (IQR = 12%).

**2a2.4 What is your interpretation of the results in terms of demonstrating reliability?** (i.e., what do the results mean and what are the norms for the test conducted?)

An SNR of 5 or greater indicates certainty that the data sources are reliable.

The IQR of the proportion of patients with diagnosis/procedure, pharmacy and lab results were 9.79%, 10.69% and 15.71%, respectively, for a large national employer (n = 12,479,154). For our test population (n = 279,666), the IQRs of the proportion of patients with diagnosis/procedure, pharmacy and lab results were 10%, 8% and 12%, respectively.

The IQR values in our test population were low and similar to that of a large national employer. These numbers suggest that the volume of data received on a regular basis demonstrates consistency and reliability of the data we receive and use in this measure.

## **2b2. VALIDITY TESTING**

**2b2.1. What level of validity testing was conducted?** (may be one or both levels)

Critical data elements

Performance measure score

Empirical validity testing

Systematic assessment of face validity of performance measure score as an indicator of quality

or resource use (*i.e., is an accurate reflection of performance quality or resource use and can distinguish performance*)

**2b2.2. For each level checked above, describe the method of validity testing and what it tests** (*describe the steps—do not just name a method; what was tested, e.g., accuracy of data elements compared to authoritative source, relationship to another measure as expected; what statistical analysis was used*)

All of our quality measures are electronic and all the data used to support the measures are electronic. In addition, we receive the data by electronic feeds. We have internal processes to ensure that we receive valid codes and where appropriate the associated values. The methodology for the development and testing of this measure included (1) extensive literature review by board-certified physicians, (2) creation of computerized algorithms by clinicians, (3) technology testing using data from different populations, (4) analysis of results with manual case review to ensure accuracy of the alert, (5) periodic review of provider and patient feedback.

Our analytic process includes testing a new rule or algorithm on the standard data set so that we can be sure of the reliability of the code. At the end of the test, we randomly select patients who are either in the numerator, or in the denominator but not the numerator, to ensure that they met the requirements of the rule. As a part of our validity testing, we check to ensure we have found the correct people in the denominator or the numerator. To ensure accuracy, we manually review the electronic data of a subset of the people who were not in the numerator to ensure that we were accurate in not counting them in the numerator. If we find errors at any stage, then we update the rules and retest.

**2b2.3. What were the statistical results from validity testing?** (*e.g., correlation; t-test, ANOVA*)

The algorithms and code sets used for the measures are all electronic. Once we test the rules, the results are reviewed by our clinical research and development committee, composed of physicians of varying specialties, pharmacists, and nurses.

We randomly select up to 10% of patients who are either in the numerator, or in the denominator but not the numerator, to ensure that they met the requirements of the rule. As a part of our validity testing, we check to ensure we have found the correct people in the denominator or the numerator. To ensure accuracy, we manually review the electronic data of a subset of the people who were not in the numerator to ensure that we were accurate in not counting them in the numerator. If we find errors at any stage, then we update the rules and retest. Of the 392 people who met the inclusion criteria, 39 people were randomly selected for validity testing. After reviewing the patient level data, 100% of those randomly selected were found to have accurately met the requirement of the rule algorithm.

**2b2.4. What is your interpretation of the results in terms of demonstrating validity?** (*i.e., what do the results mean and what are the norms for the test conducted?*)

During validity testing of this measure, we found that the appropriate patients were included in numerator and denominator, and accurately excluded.

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**2b3. EXCLUSIONS ANALYSIS**

NA  no exclusions — skip to #2b5

**2b3.1. Describe the method of testing exclusions and what it tests** (*describe the steps—do not just name a method; what was tested, e.g., whether exclusions affect overall performance scores; what statistical analysis was used*)

We do not test exclusions separately from our other data elements. Exclusion and inclusion criteria for each measure is based on a systematic review of current literature, as well the expert opinion of our clinical team—a panel of over 30 physicians, nurses, and pharmacists. Literature findings are presented to a group of clinicians on a regular basis, and after review of said literature, a consensus is reached on the algorithms of our numerator, denominator, and exclusions. We then test our algorithms on a subset of clinical and administrative data, using data from a large national health plan, large national employer, and state health plan. Our analytic process includes testing a new rule or algorithm on the standard data set so that we can be sure of the reliability of the code sets. At the end of the test, we randomly select patients who are either in the numerator, or in the denominator but not the numerator, to ensure that they met the requirements of the rule. As a part of our validity testing, we check to ensure we have found the correct people in the denominator or the numerator. To ensure accuracy, we manually review the electronic data of a subset of the people who were not in the numerator to ensure that we were accurate in not counting them in the numerator. If we find errors at any stage, then we update the rules and retest.

For this particular measure, our clinician team reached a consensus to exclude those patients with possible causes of the alarm symptoms described, **other than GERD**. Reasons for such symptoms include weight loss surgery, gastrectomy, esophageal varices, and metastatic cancers.

**2b3.2. What were the statistical results from testing exclusions?** (*include overall number and percentage of individuals excluded, frequency distribution of exclusions across measured entities, and impact on performance measure scores*)

Out of a total test population of 2, 459, 974 patients, 1170 fell into the denominator. 778 (66%) of these individuals were excluded, based on the exclusion criteria in our algorithm. The excluded populations were 59, 73, and 646, for the large national employer, state health plan, and large national insurance payor, in our test data, respectively.

**2b3.3. What is your interpretation of the results in terms of demonstrating that exclusions are needed to prevent unfair distortion of performance results?** (*i.e., the value outweighs the burden of increased data collection and analysis. Note: If patient preference is an exclusion, the measure must be specified so that the effect on the performance score is transparent, e.g., scores with and without exclusion*)

It is important to identify the appropriate population that requires further investigation and/or studies for chronic GERD symptoms with alarm symptoms, in order to prevent over screening and the potential harmful outcomes associated with over screening. Our exclusion criteria and rules algorithm allow for specificity when identifying those patients that require further evaluation and prevents over burdening providers and healthcare systems with overutilization of health care services.

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**2b5. IDENTIFICATION OF STATISTICALLY SIGNIFICANT & MEANINGFUL DIFFERENCES IN PERFORMANCE**

**2b5.1. Describe the method for determining if statistically significant and clinically/practically meaningful differences in performance measure scores among the measured entities can be identified** *(describe the steps—do not just name a method; what statistical analysis was used)*

We tested this measure on data from 2, 459, 974 patients from a major national health plan, a large national employer, and a state health plan, which represent a subset of our total population. We used the average performance measurement scores and 95% confidence intervals to determine statistically significant meaningful differences in the performance measure scores among the test population.

**2b5.2. What were the statistical results from testing the ability to identify differences in performance measure scores across measured entities?** *(at a minimum, the distribution of performance measure scores for the measured entities by decile/quartile, mean, std dev; preferably also number and percentage statistically different from mean or some benchmark, different from expected, etc.)*

The statistical test results in performance measure scores for each of the three test populations were, as follows:

1. National Health Plan: 86% (lower and upper 95% CI: 73-99%)
2. State Health Plan: 70% (lower and upper 95% CI: 64-76%)
3. Large National Employer: 55% (lower and upper 95% CI: 46-64%)

**2b5.3. What is your interpretation of the results in terms of demonstrating the ability to identify statistically significant and clinically/practically meaningful differences in performance across measured entities?** *(i.e., what do the results mean and what are the norms for the test conducted?)*

The test results of the measure illustrate large differences in performance across the 3 populations. We conclude that our test results will have the ability to identify statistically significant and clinically/practically meaningful differences in performance across different entities.

NQF staff enter #/title

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***If not an intermediate or health outcome or resource use measure, this section can be deleted***

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NQF ID	RULE TYPE	ELEMENT NAME	ATOM	ICD 10	DESCRIPTION
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	14.26	#N/A	DESTRUCTION CHORIORETINAL LESION RAD TX
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.01	#N/A	INCISION OF ESOPHAGEAL WEB
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.09	#N/A	OTHER INCISION OF ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.1	#N/A	ESOPHAGOSTOMY
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.11	I39	CERVICAL ESOPHAGOSTOMY
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.12	#N/A	EXTERIORIZATION OF ESOPHAGEAL POUCH
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.19	I339	OTHER EXTERNAL FISTULIZATION OF ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.2	#N/A	DIAGNOSTIC PROCEDURES ON ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.21	#N/A	OPERATIVE ESOPHAGOSCOPY BY INCISION
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.22	#N/A	ESOPHAGOSCOPY THROUGH ARTIFICIAL STOMA
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.23	#N/A	OTHER ESOPHAGOSCOPY
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.24	#N/A	CLOSED BIOPSY OF ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.25	#N/A	OPEN BIOPSY OF ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.29	#N/A	OTHER DIAGNOSTIC PROCEDURES ON ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.3	#N/A	LOCAL EXCISION/DESTRUC LESION/TISSUE ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.31	I310	LOCAL EXCISION OF ESOPHAGEAL DIVERTICULUM
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.32	I311	LOCAL EXCISION OTHER LESION OR TISSUE ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.33	I314	ENDO EXCISION/DESTRUC LESION/TISSUE ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.39	I319	OTHER DESTRUCTION LESION OR TISSUE ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.4	#N/A	EXCISION OF ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.41	I350	PARTIAL ESOPHAGECTOMY
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.42	I360	TOTAL ESOPHAGECTOMY
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.5	#N/A	INTRATHORACIC ANASTOMOSIS OF ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.51	#N/A	INTRATHORACIC ESOPHAGUESOPHAGOSTOMY
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.52	I428	INTRATHORACIC ESOPHAGOGASTROSTOMY
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.53	I424	INTRATHOR ESOPH ANASTOM W/INTERPOSITION SM BOWEL
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.54	I425	OTHER INTRATHORACIC ESOPHAGOGASTROSTOMY
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.55	I426	INTRATHOR ESOPH ANASTOM W/INTERPOSITION COLON
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.56	#N/A	OTHER INTRATHORACIC ESOPHAGOGASTROSTOMY
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.58	I43	INTRATHORACIC ESOPH ANASTOM W/OTH INTERPOSITION
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.59	I427	OTHER INTRATHORACIC ANASTOMOSIS OF ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.6	#N/A	ANTESTERNAL ANASTOMOSIS OF ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.61	#N/A	ANTESTERNAL ESOPHAGUESOPHAGOSTOMY
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.62	I444	ANTESTERNAL ESOPHAGOGASTROSTOMY
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.63	I447	ANTESTERNAL ESOPH ANASTOM W/INTERPSTN SM BOWEL
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.64	I4510	OTHER ANTESTERNAL ESOPHAGOGASTROSTOMY
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.65	#N/A	ANTESTERNAL ESOPH ANASTOM W/INTERPOSITION COLON
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.66	I455	OTHER ANTESTERNAL ESOPHAGOGASTROSTOMY
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.68	#N/A	OTH ANTESTERNAL ESOPH ANASTOM W/INTERPOSITION
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.69	I459	OTHER ANTESTERNAL ANASTOMOSIS OF ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.7	#N/A	ESOPHAGOMYOTOMY
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.8	#N/A	OTHER REPAIR OF ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.81	I501	INSERTION OF PERMANENT TUBE INTO ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.82	#N/A	SUTURE OF LACERATION OF ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.83	#N/A	CLOSURE OF ESOPHAGOSTOMY
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.84	#N/A	REPAIR OF ESOPHAGEAL FISTULA NEC
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.85	#N/A	REPAIR OF ESOPHAGEAL STRICTURE
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.86	#N/A	PRODUCTION SUBQ TUNNEL WITHOUT ESOPH ANASTOM
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.87	#N/A	OTHER GRAFT OF ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.89	I509	OTHER REPAIR OF ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.9	#N/A	OTHER OPERATIONS ON ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.91	I515	LIGATION OF ESOPHAGEAL VARICES
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.92	I2510	DILATION OF ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.99	I519	OTHER OPERATIONS ON ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43.41	#N/A	ENDO EXCISION/DESTRUC LESION/TISSUE STOMACH
622	NUMERATOR	GASTRECTOMY	43.5	#N/A	PARTIAL GASTRECTOMY W/ANASTOMOSIS TO ESOPHAGUS
622	NUMERATOR	GASTRECTOMY	43.6	I6789	PARTIAL GASTRECTOMY WITH ANASTOMOSIS TO DUODENUM
622	NUMERATOR	GASTRECTOMY	43.7	#N/A	PARTIAL GASTRECTOMY WITH ANASTOMOSIS TO JEJUNUM
622	NUMERATOR	GASTRECTOMY	43.8	#N/A	OTHER PARTIAL GASTRECTOMY
622	NUMERATOR	GASTRECTOMY	43.81	#N/A	PARTIAL GASTRECTOMY WITH JEJUNAL TRANSPOSITION
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	43.82	#N/A	LAPAROSCOPIC VERTICAL SLEEVE GASTRECTOMY
622	NUMERATOR	GASTRECTOMY	43.89	I6990	OPEN AND OTHER PARTIAL GASTRECTOMY
622	NUMERATOR	GASTRECTOMY	43.9	#N/A	TOTAL GASTRECTOMY
622	NUMERATOR	GASTRECTOMY	43.91	#N/A	TOTAL GASTRECTOMY WITH INTESTINAL INTERPOSITION
622	NUMERATOR	GASTRECTOMY	43.99	#N/A	OTHER TOTAL GASTRECTOMY
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	44.31	I731	HIGH GASTRIC BYPASS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	44.43	#N/A	<i>Endoscopic control of gastric or duodenal bleeding</i>
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	44.95	#N/A	LAPAROSCOPIC GASTRIC RESTRICTIVE PROCEDURE
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	44.96	#N/A	LAPAROSCOPIC REVISION GASTRIC RESTRICTIVE PROC
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	44.97	#N/A	LAPAROSCOPIC REMV GASTRIC RESTRICTIVE DEVICE(S)
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	44.98	#N/A	(LAP) ADJ SIZE ADJUSTABL GASTRIC RESTRICT DEVIC
622	NUMERATOR	ESOPHAGEAL PROCEDURES	45.13	#N/A	<i>Other endoscopy of small intestine</i>
622	NUMERATOR	ESOPHAGEAL PROCEDURES	45.16	#N/A	<i>Esophagogastroduodenoscopy (EGD) with closed biopsy</i>
622	NUMERATOR	UPPER GI STUDY	87.62	#N/A	UPPER GI SERIES
622	NUMERATOR	UPPER GI STUDY	89.32	S91109A	ESOPHAGEAL MANOMETRY
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	92.2	#N/A	THERAPEUTIC RADIOLOGY AND NUCLEAR MEDICINE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	92.22	S301XXA	ORTHOVOLTAGE RADIATION
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	92.23	#N/A	RADIOISOTOPIC TELERADIO THERAPY
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	92.24	S30201A	TELERADIO THERAPY USING PROTONS
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	92.25	#N/A	TELERADIO THERAPY USING ELECTRONS
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	92.26	#N/A	TELERADIO THERAPY OF OTHER PARTICULATE RADIATION
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	92.27	#N/A	IMPLANTATION OR INSERTION RADIOACTIVE ELEMENTS
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	92.28	S303XXA	INJECTION OR INSTALLATION OF RADIOISOTOPES
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	92.29	S2020XA	OTHER RADIO THERAPEUTIC PROCEDURE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	92.41	#N/A	INTRA-OPERATIVE ELECTRON RADIATION THERAPY
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	115	#N/A	ROOM & BOARD-PRIVATE (ONE BED) - Hospice
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	125	#N/A	ROOM & BOARD-SEMIPRIVATE (TWO BEDS) - Hospice
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	135	D869	ROOM & BOARD-THREE AND FOUR BEDS - Hospice
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	145	#N/A	ROOM & BOARD-DELUXE PRIVATE - Hospice
622	NUMERATOR	CANCER ESOPHAGEAL	150	#N/A	MALIGNANT NEOPLASM OF ESOPHAGUS
622	NUMERATOR	CANCER ESOPHAGEAL	150.1	C154	MALIGNANT NEOPLASM OF THORACIC ESOPHAGUS
622	NUMERATOR	CANCER ESOPHAGEAL	150.2	C155	MALIGNANT NEOPLASM OF ABDOMINAL ESOPHAGUS
622	NUMERATOR	CANCER ESOPHAGEAL	150.3	C153	MALIGNANT NEOPLASM OF UPPER THIRD OF ESOPHAGUS
622	NUMERATOR	CANCER ESOPHAGEAL	150.4	C154	MALIGNANT NEOPLASM OF MIDDLE THIRD OF ESOPHAGUS
622	NUMERATOR	CANCER ESOPHAGEAL	150.5	C155	MALIGNANT NEOPLASM OF LOWER THIRD OF ESOPHAGUS
622	NUMERATOR	CANCER ESOPHAGEAL	150.8	C158	MALIGNANT NEOPLASM OTHER SPEC PART ESOPHAGUS
622	NUMERATOR	CANCER ESOPHAGEAL	150.9	C159	MALIGNANT NEOPLASM OF ESOPHAGUS UNSPECIFIED SITE
622	NUMERATOR	CANCER GASTRIC	151	#N/A	MALIGNANT NEOPLASM OF STOMACH
622	NUMERATOR	CANCER GASTRIC	151.1	C164	MALIGNANT NEOPLASM OF PYLORUS
622	NUMERATOR	CANCER GASTRIC	151.2	C163	MALIGNANT NEOPLASM OF PYLORIC ANTRUM
622	NUMERATOR	CANCER GASTRIC	151.3	C161	MALIGNANT NEOPLASM OF FUNDUS OF STOMACH
622	NUMERATOR	CANCER GASTRIC	151.4	C162	MALIGNANT NEOPLASM OF BODY OF STOMACH

622	NUMERATOR	CANCER GASTRIC	151.5	C165	MALIGNANT NEOPLASM LESSER CURV STOMACH UNSPEC
622	NUMERATOR	CANCER GASTRIC	151.6	C166	MALIGNANT NEOPLASM GREATER CURV STOMACH UNSPEC
622	NUMERATOR	CANCER GASTRIC	151.8	C168	MALIGNANT NEOPLASM OTHER SPECIFIED SITES STOMACH
622	NUMERATOR	CANCER GASTRIC	151.9	C169	MALIGNANT NEOPLASM OF STOMACH UNSPECIFIED SITE
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	155	#N/A	ROOM & BOARD-WARD - Hospice
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	161	#N/A	MALIGNANT NEOPLASM OF GLOTTIS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	161.1	C321	MALIGNANT NEOPLASM OF SUPRAGLOTTIS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	161.1	C321	MALIGNANT NEOPLASM OF SUPRAGLOTTIS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	161.2	C322	MALIGNANT NEOPLASM OF SUBGLOTTIS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	161.2	C322	MALIGNANT NEOPLASM OF SUBGLOTTIS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	161.3	C323	MALIGNANT NEOPLASM OF LARYNGEAL CARTILAGES
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	161.3	C323	MALIGNANT NEOPLASM OF LARYNGEAL CARTILAGES
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	161.8	C328	MALIGNANT NEOPLASM OTHER SPECIFIED SITES LARYNX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	161.8	C328	MALIGNANT NEOPLASM OTHER SPECIFIED SITES LARYNX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	161.9	C329	MALIGNANT NEOPLASM OF LARYNX UNSPECIFIED SITE
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	161.9	C329	MALIGNANT NEOPLASM OF LARYNX UNSPECIFIED SITE
622	DENOMINATOR GENERAL EXCLUSION	CANCER BRAIN MALIGNANT	191	#N/A	MALIGNANT NEOPLASM OF BRAIN
622	DENOMINATOR GENERAL EXCLUSION	CANCER BRAIN MALIGNANT	191.1	C711	MALIGNANT NEOPLASM OF FRONTAL LOBE OF BRAIN
622	DENOMINATOR GENERAL EXCLUSION	CANCER BRAIN MALIGNANT	191.2	C712	MALIGNANT NEOPLASM OF TEMPORAL LOBE OF BRAIN
622	DENOMINATOR GENERAL EXCLUSION	CANCER BRAIN MALIGNANT	191.3	C713	MALIGNANT NEOPLASM OF PARIETAL LOBE OF BRAIN
622	DENOMINATOR GENERAL EXCLUSION	CANCER BRAIN MALIGNANT	191.4	C714	MALIGNANT NEOPLASM OF OCCIPITAL LOBE OF BRAIN
622	DENOMINATOR GENERAL EXCLUSION	CANCER BRAIN MALIGNANT	191.5	C715	MALIGNANT NEOPLASM OF VENTRICLES OF BRAIN
622	DENOMINATOR GENERAL EXCLUSION	CANCER BRAIN MALIGNANT	191.7	C717	MALIGNANT NEOPLASM OF BRAIN STEM
622	DENOMINATOR GENERAL EXCLUSION	CANCER BRAIN MALIGNANT	191.8	C718	MALIGNANT NEOPLASM OF OTHER PARTS OF BRAIN
622	DENOMINATOR GENERAL EXCLUSION	CANCER BRAIN MALIGNANT	191.9	C719	MALIGNANT NEOPLASM OF BRAIN UNSPECIFIED SITE
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	196	#N/A	SEC&UNSPECIFIED MALIGNANT NEOPLASM LYMPH NODES
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	196.1	C771	SEC&UNSPEC MALIG NEOPLASM INTRATHORACIC NODES
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	196.2	C772	SEC&UNSPEC MALIG NEOPLASM INTRA-ABD LYMPH NODES
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	196.3	C773	SEC&UNSPEC MALIG NEOPLASM NODES AX&UPPER LIMB
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	196.5	C774	SEC&UNSPEC MALIG NEOPLSM NODES ING RGN&LOW LIMB
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	196.6	C775	SEC&UNSPEC MALIG NEOPLASM INTRAPELVIC NODES
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	196.8	C778	SEC&UNSPEC MALIG NEOPLASM NODES MULTIPLE SITES
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	196.9	C779	SEC&UNSPEC MALIG NEOPLASM NODES SITE UNSPEC
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	197	#N/A	SEC MALIG NEOPLASM RESPIRATORY&DIGESTIVE SYSTEMS
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	197.1	C781	SECONDARY MALIGNANT NEOPLASM OF MEDIASTINUM
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	197.2	C782	SECONDARY MALIGNANT NEOPLASM OF PLEURA
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	197.3	C7839	SEC MALIGNANT NEOPLASM OTHER RESPIRATORY ORGANS
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	197.4	C784	SEC MALIG NEOPLASM SMALL INTESTINE INCL DUODENUM
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	197.5	C785	SEC MALIGNANT NEOPLASM OF LARGE INTESTINE&RECTUM
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	197.6	C786	SEC MALIG NEOPLASM RETROPERITONEUM&PERITONEUM
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	197.7	C787	SECONDARY MALIGNANT NEOPLASM OF LIVER
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	197.8	C787	SEC MALIG NEOPLASM OTHER DIGESTIVE ORGANS&SPLEEN
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	198	#N/A	SEC MALIGNANT NEOPLASM OF OTHER SPECIFIED SITES
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	198.1	C7911	SEC MALIGNANT NEOPLASM OF OTHER URINARY ORGANS
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	198.2	C792	SECONDARY MALIGNANT NEOPLASM OF SKIN
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	198.3	C7931	SEC MALIGNANT NEOPLASM OF BRAIN AND SPINAL CORD
622	DENOMINATOR GENERAL EXCLUSION	CANCER BRAIN MALIGNANT	198.3	C7931	SEC MALIGNANT NEOPLASM OF BRAIN AND SPINAL CORD
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	198.4	C7932	SEC MALIG NEOPLASM OTHER PARTS NERVOUS SYSTEM
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	198.5	C7951	SEC MALIGNANT NEOPLASM OF BONE AND BONE MARROW
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	198.6	C7960	SECONDARY MALIGNANT NEOPLASM OF OVARY
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	198.7	C7970	SECONDARY MALIGNANT NEOPLASM OF ADRENAL GLAND
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	198.8	#N/A	SEC MALIGNANT NEOPLASM OF OTHER SPECIFIED SITES
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	198.81	C7981	SECONDARY MALIGNANT NEOPLASM OF BREAST
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	198.82	C7982	SECONDARY MALIGNANT NEOPLASM OF GENITAL ORGANS
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	198.89	C7989	SEC MALIGNANT NEOPLASM OF OTHER SPECIFIED SITES
622	NUMERATOR	CANCER ESOPHAGEAL	230.1	D001	CARCINOMA IN SITU OF ESOPHAGUS
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	235	#N/A	INCREMENTAL NURSING CHARGE - Hospice
622	DENOMINATOR	OBESITY	278	#NA	Overweight, obesity and other hyperalimentionation
622	DENOMINATOR	OBESITY	278.01	E66.01	Morbid obesity
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	332.1	G2111	SECONDARY PARKINSONISM
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	332.1	G2111	SECONDARY PARKINSONISM
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	335.2	#N/A	MOTOR NEURON DISEASE
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	335.2	#N/A	MOTOR NEURON DISEASE
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	335.21	G1221	PROGRESSIVE MUSCULAR ATROPHY
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	335.21	G1221	PROGRESSIVE MUSCULAR ATROPHY
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	335.22	G1222	PROGRESSIVE BULBAR PALSY
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	335.22	G1222	PROGRESSIVE BULBAR PALSY
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	335.23	G128	PSEUDOBULBAR PALSY
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	335.23	G128	PSEUDOBULBAR PALSY
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	335.24	G1229	PRIMARY LATERAL SCLEROSIS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	335.24	G1229	PRIMARY LATERAL SCLEROSIS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	335.29	G1229	OTHER MOTOR NEURON DISEASES
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	335.29	G1229	OTHER MOTOR NEURON DISEASES
622	DENOMINATOR GENERAL EXCLUSION	CARDIAC ARREST	427.5	I469	CARDIAC ARREST



622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	438.8	#N/A	OTH LATE EFF CEREBRVASC DZ DUE CEREBRVASC DZ
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	438.8	#N/A	OTH LATE EFF CEREBRVASC DZ DUE CEREBRVASC DZ
622	DENOMINATOR	DYSPHAGIA	438.82	I69991	DYSPHAGIA DUE TO CEREBROVASCULAR DISEASE
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	438.82	I69991	DYSPHAGIA DUE TO CEREBROVASCULAR DISEASE
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	438.82	I69991	DYSPHAGIA DUE TO CEREBROVASCULAR DISEASE
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	438.89	I69898	OTHER LATE EFFECTS OF CEREBROVASCULAR DISEASE
622	DENOMINATOR EXCLUSION	ESOPHAGEAL VARICES	456.1	I8500	ESOPHAGEAL VARICES WITHOUT MENTION OF BLEEDING
622	DENOMINATOR EXCLUSION	ESOPHAGEAL VARICES	456.2	#N/A	ESOPHAGEAL VARICES DISEASES CLASSIFIED ELSEWHERE
622	DENOMINATOR EXCLUSION	ESOPHAGEAL VARICES	456.21	I8510	ESOPH VARICES W/O MENTION BLEED DZ CLASS ELSW
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.2	#N/A	OTHER DISEASES OF PHARYNX NEC
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.2	#N/A	OTHER DISEASES OF PHARYNX NEC
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.21	J391	CELLULITIS OF PHARYNX OR NASOPHARYNX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.21	J391	CELLULITIS OF PHARYNX OR NASOPHARYNX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.22	J390	PARAPHARYNGEAL ABSCESS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.22	J390	PARAPHARYNGEAL ABSCESS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.24	J390	RETROPHARYNGEAL ABSCESS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.25	J392	EDEMA OF PHARYNX OR NASOPHARYNX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.25	J392	EDEMA OF PHARYNX OR NASOPHARYNX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.26	J392	EDEMA OF PHARYNX OR NASOPHARYNX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.26	J392	EDEMA OF PHARYNX OR NASOPHARYNX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.29	J392	OTHER DISEASE OF PHARYNX OR NASOPHARYNX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.3	#N/A	PARALYSIS OF VOCAL CORDS OR LARYNX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.3	#N/A	PARALYSIS OF VOCAL CORDS OR LARYNX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.6	J384	EDEMA OF LARYNX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.6	J384	EDEMA OF LARYNX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.7	#N/A	OTHER DISEASES OF LARYNX NEC
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.7	#N/A	OTHER DISEASES OF LARYNX NEC
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.71	J387	CELLULITIS AND PERICHONDRIITIS OF LARYNX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.71	J387	CELLULITIS AND PERICHONDRIITIS OF LARYNX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.74	J386	STENOSIS OF LARYNX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.74	J386	STENOSIS OF LARYNX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.75	J385	LARYNGEAL SPASM
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.75	J385	LARYNGEAL SPASM
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.79	J387	OTHER DISEASES OF LARYNX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.79	J387	OTHER DISEASES OF LARYNX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530	#N/A	ACHALASIA AND CARDIOSPASM
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.1	#N/A	ESOPHAGITIS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.1	#N/A	ESOPHAGITIS
622	DENOMINATOR	GERD W/ BARRETT'S	530.11	K210	REFLUX ESOPHAGITIS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.12	K209	ACUTE ESOPHAGITIS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.12	K209	ACUTE ESOPHAGITIS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.13	K200	EOSINOPHILIC ESOPHAGITIS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.13	K200	EOSINOPHILIC ESOPHAGITIS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.19	K208	OTHER ESOPHAGITIS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.19	K208	OTHER ESOPHAGITIS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.2	#N/A	ULCER OF ESOPHAGUS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.2	#N/A	ULCER OF ESOPHAGUS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.21	K2211	ULCER OF ESOPHAGUS WITH BLEEDING
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.21	K2211	ULCER OF ESOPHAGUS WITH BLEEDING
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.3	K222	STRICTURE AND STENOSIS OF ESOPHAGUS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.3	K222	STRICTURE AND STENOSIS OF ESOPHAGUS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.4	K223	PERFORATION OF ESOPHAGUS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.4	K223	PERFORATION OF ESOPHAGUS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.5	K224	DYSKINESIA OF ESOPHAGUS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.5	K224	DYSKINESIA OF ESOPHAGUS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.6	K225	DIVERTICULUM OF ESOPHAGUS, ACQUIRED
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.6	K225	DIVERTICULUM OF ESOPHAGUS, ACQUIRED
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.7	K226	GASTROESOPHAGEAL LACERATION-HEMORRHAGE SYNDROME
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.7	K226	GASTROESOPHAGEAL LACERATION-HEMORRHAGE SYNDROME
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.8	#N/A	OTHER SPECIFIED DISORDERS OF ESOPHAGUS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.8	#N/A	OTHER SPECIFIED DISORDERS OF ESOPHAGUS
622	DENOMINATOR	GERD W/ BARRETT'S	530.81	K219	ESOPHAGEAL REFLUX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.82	K228	ESOPHAGEAL HEMORRHAGE
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.82	K228	ESOPHAGEAL HEMORRHAGE
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.83	K228	ESOPHAGEAL LEUKOPLAKIA
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.83	K228	ESOPHAGEAL LEUKOPLAKIA
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.84	J860	TRACHEOESOPHAGEAL FISTULA
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.84	J860	TRACHEOESOPHAGEAL FISTULA
622	DENOMINATOR	GERD W/ BARRETT'S	530.85	K2270	BARRETTS ESOPHAGUS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.85	K2270	BARRETTS ESOPHAGUS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.85	K2270	BARRETTS ESOPHAGUS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.86	K9432	INFECTION OF ESOPHAGOSTOMY
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.86	K9432	INFECTION OF ESOPHAGOSTOMY
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.87	K9433	MECHANICAL COMPLICATION OF ESOPHAGOSTOMY
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.87	K9433	MECHANICAL COMPLICATION OF ESOPHAGOSTOMY
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.89	K228	OTHER SPECIFIED DISORDER OF THE ESOPHAGUS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.89	K228	OTHER SPECIFIED DISORDER OF THE ESOPHAGUS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.9	K229	UNSPECIFIED DISORDER OF ESOPHAGUS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.9	K229	UNSPECIFIED DISORDER OF ESOPHAGUS
622	DENOMINATOR EXCLUSION	WEIGHT LOSS SURGERY (ICD9)	539	#N/A	COMPLICATIONS OF BARIATRIC PROCEDURES
622	DENOMINATOR EXCLUSION	WEIGHT LOSS SURGERY (ICD9)	539.01	K9501	INFECTION DUE TO GASTRIC BAND PROCEDURE
622	DENOMINATOR EXCLUSION	WEIGHT LOSS SURGERY (ICD9)	539.09	K9509	OTHER COMPLICATIONS OF GASTRIC BAND PROCEDURE
622	DENOMINATOR EXCLUSION	WEIGHT LOSS SURGERY (ICD9)	539.8	#N/A	COMPLICATIONS OF OTHER BARIATRIC PROCEDURE
622	DENOMINATOR EXCLUSION	WEIGHT LOSS SURGERY (ICD9)	539.81	K9581	INFECTION DUE TO OTHER BARIATRIC PROCEDURE
622	DENOMINATOR EXCLUSION	WEIGHT LOSS SURGERY (ICD9)	539.89	K9589	OTHER COMPLICATIONS OF OTHER BARIATRIC PROCEDURE
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	650	O80	HOSPICE SERVICE - General
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	651	#N/A	HOSPICE SERVICE - Routine home care
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	652	#N/A	HOSPICE SERVICE - Continuous home care
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	653	#N/A	HOSPICE SERVICE - Reserved
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	654	#N/A	HOSPICE SERVICE - Reserved
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	655	#N/A	HOSPICE SERVICE - Inpatient respite care
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	656	#N/A	HOSPICE SERVICE - General inpatient care nonrespite
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	657	#N/A	HOSPICE SERVICE - Physician services
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	658	#N/A	HOSPICE SERVICE - Hospice room & board-Nursing facility
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	659	#N/A	HOSPICE SERVICE - Other hospice service
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	710.1	M340	SYSTEMIC SCLEROSIS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	710.1	M340	SYSTEMIC SCLEROSIS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	710.2	M3500	SICCA SYNDROME
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	710.2	M3500	SICCA SYNDROME
622	DENOMINATOR GENERAL EXCLUSION	CARDIAC ARREST	779.85	P2981	CARDIAC ARREST OF NEWBORN
622	DENOMINATOR	WEIGHT LOSS	783.2	#N/A	ABNORMAL LOSS OF WEIGHT

622	DENOMINATOR	WEIGHT LOSS	783.21	R634	LOSS OF WEIGHT
622	DENOMINATOR	WEIGHT LOSS	783.22	R636	UNDERWEIGHT
622	DENOMINATOR	GERD W/ BARRETT'S	787.1	R12	HEARTBURN
622	DENOMINATOR	DYSPHAGIA	787.2	#N/A	DYSPHAGIA
622	DENOMINATOR	DYSPHAGIA	787.21	R1311	DYSPHAGIA ORAL PHASE
622	DENOMINATOR	DYSPHAGIA	787.22	R1312	DYSPHAGIA OROPHARYNGEAL PHASE
622	DENOMINATOR	DYSPHAGIA	787.23	R1313	DYSPHAGIA PHARYNGEAL PHASE
622	DENOMINATOR	DYSPHAGIA	787.24	R1314	DYSPHAGIA PHARYNGOESOPHAGEAL PHASE
622	DENOMINATOR	DYSPHAGIA	787.29	R1319	OTHER DYSPHAGIA
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	933.1	T17300A	FOREIGN BODY IN LARYNX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	933.1	T17300A	FOREIGN BODY IN LARYNX
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY (ICD9)	999.81	T80810A	EXTRAVASATION OF VESICANT CHEMOTHERAPY
622	DENOMINATOR	PUD/GERD DRUGS	11661	#N/A	cimetidine in 0.9 % NaCl - INTRAVENOUS SOLUTION, PIGGYBACK (ML) 300MG/50ML
622	DENOMINATOR	PUD/GERD DRUGS	11663	#N/A	cimetidine HCl - VIAL (SDV,MDV OR ADDITIVE) (ML) 150 MG/ML
622	DENOMINATOR	PUD/GERD DRUGS	11664	#N/A	cimetidine - SOLUTION, ORAL 300 MG/5ML
622	DENOMINATOR	PUD/GERD DRUGS	11667	#N/A	cimetidine - TABLET 400 MG
622	DENOMINATOR	PUD/GERD DRUGS	11668	#N/A	cimetidine - TABLET 800 MG
622	DENOMINATOR	PUD/GERD DRUGS	11670	#N/A	ranitidine HCl - DISPOSABLE SYRINGE (ML) 25 MG/ML
622	DENOMINATOR	PUD/GERD DRUGS	11671	#N/A	ranitidine HCl - VIAL (SDV,MDV OR ADDITIVE) (ML) 25 MG/ML
622	DENOMINATOR	PUD/GERD DRUGS	11672	#N/A	ranitidine HCl - SYRUP 15 MG/ML
622	DENOMINATOR	PUD/GERD DRUGS	11673	#N/A	ranitidine HCl - TABLET 150 MG
622	DENOMINATOR	PUD/GERD DRUGS	11674	#N/A	ranitidine HCl - TABLET 300 MG
622	DENOMINATOR	PUD/GERD DRUGS	11676	#N/A	famotidine - SUSPENSION, ORAL (FINAL DOSE FORM) 40MG/5ML
622	DENOMINATOR	PUD/GERD DRUGS	11677	#N/A	famotidine - TABLET 20 MG
622	DENOMINATOR	PUD/GERD DRUGS	11678	#N/A	famotidine - TABLET 40 MG
622	DENOMINATOR	PUD/GERD DRUGS	11679	#N/A	nizatidine - CAPSULE (HARD, SOFT, ETC.) 150 MG
622	DENOMINATOR	PUD/GERD DRUGS	11680	#N/A	nizatidine - CAPSULE (HARD, SOFT, ETC.) 300 MG
622	DENOMINATOR	PUD/GERD DRUGS	13009	#N/A	OMEPRAZOLE - CAPSULE, DELAYED RELEASE (OBS 06-25-01) 20 MG
622	DENOMINATOR	PUD/GERD DRUGS	16223	#N/A	ranitidine HCl - CAPSULE (HARD, SOFT, ETC.) 150 MG
622	DENOMINATOR	PUD/GERD DRUGS	16224	#N/A	ranitidine HCl - CAPSULE (HARD, SOFT, ETC.) 300 MG
622	DENOMINATOR	PUD/GERD DRUGS	17206	#N/A	ranitidine in 0.45 % sodium Cl - INTRAVENOUS SOLUTION, PIGGYBACK (ML) 50 MG/50ML
622	DENOMINATOR	PUD/GERD DRUGS	18715	#N/A	ranitidine HCl - TABLET, EFFERVESCENT 150 MG
622	DENOMINATOR	PUD/GERD DRUGS	19287	#N/A	ranitidine HCl - PACKET (EA) 150 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	19296	#N/A	PLMT EXPANDABLE CATH BRST FOLLOWING PRTL MAST
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	19297	#N/A	PLMT EXPANDABLE CATH BRST CONCURRENT PRTL MAST
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	19298	#N/A	PLMT RADTHX BRACHYTX BRST FOLLOWING PRTL MAST
622	DENOMINATOR	PUD/GERD DRUGS	19757	#N/A	CIMETIDINE HCL - LIQUID (ML) 400 MG/6.7
622	DENOMINATOR	PUD/GERD DRUGS	21222	#N/A	OMEPRAZOLE - CAPSULE, DELAYED RELEASE (OBS 06-25-01) 40 MG
622	DENOMINATOR	PUD/GERD DRUGS	21688	#N/A	famotidine - TABLET 10 MG
622	DENOMINATOR	PUD/GERD DRUGS	21732	#N/A	famotidine (PF)-NaCl (iso-os) - INTRAVENOUS SOLUTION, PIGGYBACK (ML) 20MG/50ML
622	DENOMINATOR	PUD/GERD DRUGS	21793	#N/A	cimetidine - TABLET 100 MG
622	DENOMINATOR	PUD/GERD DRUGS	21852	#N/A	LANSOPRAZOLE - CAPSULE, DELAYED RELEASE (OBS 06-25-01) 30 MG
622	DENOMINATOR	PUD/GERD DRUGS	22270	#N/A	OMEPRAZOLE - CAPSULE, DELAYED RELEASE (OBS 06-25-01) 10 MG
622	DENOMINATOR	PUD/GERD DRUGS	23223	#N/A	cimetidine - VIAL (SDV,MDV OR ADDITIVE) (ML) 150 MG/ML
622	DENOMINATOR	PUD/GERD DRUGS	23226	#N/A	cimetidine in 0.9 % NaCl - INTRAVENOUS SOLUTION 1200MG/L
622	DENOMINATOR	PUD/GERD DRUGS	23227	#N/A	cimetidine in 0.9 % NaCl - INTRAVENOUS SOLUTION 1.2G/0.25L
622	DENOMINATOR	PUD/GERD DRUGS	23228	#N/A	cimetidine in 0.9 % NaCl - INTRAVENOUS SOLUTION 1.2G/0.5L
622	DENOMINATOR	PUD/GERD DRUGS	23229	#N/A	cimetidine in 0.9 % NaCl - INTRAVENOUS SOLUTION 900MG/0.5L
622	DENOMINATOR	PUD/GERD DRUGS	23230	#N/A	cimetidine in 0.9 % NaCl - INTRAVENOUS SOLUTION 900MG/L
622	DENOMINATOR	PUD/GERD DRUGS	23231	#N/A	cimetidine in 0.9 % NaCl - INTRAVENOUS SOLUTION 900MG/.25L
622	DENOMINATOR	PUD/GERD DRUGS	23396	#N/A	cimetidine (bulk) - POWDER (GRAM)
622	DENOMINATOR	PUD/GERD DRUGS	23441	#N/A	ranitidine HCl - TABLET 75 MG
622	DENOMINATOR	PUD/GERD DRUGS	23586	#N/A	LANSOPRAZOLE - CAPSULE, DELAYED RELEASE (OBS 06-25-01) 15 MG
622	DENOMINATOR	PUD/GERD DRUGS	23987	#N/A	ranitidine bismuth citrate - TABLET 400 MG
622	DENOMINATOR	PUD/GERD DRUGS	25703	#N/A	omeprazole magnesium - TABLET, DELAYED RELEASE (ENTERIC COATED) 20 MG
622	DENOMINATOR	PUD/GERD DRUGS	27151	#N/A	nizatidine - TABLET 75 MG
622	DENOMINATOR	PUD/GERD DRUGS	27462	#N/A	pantoprazole - TABLET, DELAYED RELEASE (ENTERIC COATED) 40 MG
622	DENOMINATOR	PUD/GERD DRUGS	30106	#N/A	lansoprazole - CAPSULE, DELAYED RELEASE (ENTERIC COATED) 15 MG
622	DENOMINATOR	PUD/GERD DRUGS	30107	#N/A	lansoprazole - CAPSULE, DELAYED RELEASE (ENTERIC COATED) 30 MG
622	DENOMINATOR	PUD/GERD DRUGS	31055	#N/A	famotidine - TABLET, DISINTEGRATING 20 MG
622	DENOMINATOR	PUD/GERD DRUGS	31056	#N/A	famotidine - TABLET, DISINTEGRATING 40 MG
622	DENOMINATOR	PUD/GERD DRUGS	33530	#N/A	omeprazole - CAPSULE, DELAYED RELEASE (ENTERIC COATED) 20 MG
622	DENOMINATOR	PUD/GERD DRUGS	39545	#N/A	pantoprazole - TABLET, DELAYED RELEASE (ENTERIC COATED) 20 MG
622	DENOMINATOR	PUD/GERD DRUGS	40887	#N/A	lansoprazole - SUSPENSION, DELAYED RELEASE, RECONST. 30 MG
622	DENOMINATOR	PUD/GERD DRUGS	40941	#N/A	RABEPRAZOLE - TABLET, DELAYED RELEASE (ENTERIC COATED) 20 MG
622	DENOMINATOR	PUD/GERD DRUGS	43136	#N/A	omeprazole - CAPSULE, DELAYED RELEASE (ENTERIC COATED) 10 MG
622	DENOMINATOR	PUD/GERD DRUGS	43137	#N/A	omeprazole - CAPSULE, DELAYED RELEASE (ENTERIC COATED) 40 MG
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43200	#N/A	ESPHGSC RGD/FLX DX W/WO COLLI SPEC BR/WA SPX
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43202	#N/A	ESPHGSC RGD/FLX W/BIOPSY SINGLE/MULTIPLE
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43204	#N/A	ESPHGSC RGD/FLX W/NIX SCLEROSIS ESOPHGL VARC
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43205	#N/A	ESPHGSC RGD/FLX W/BAND LIGATION ESOPHGL VARICES
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43215	#N/A	ESPHGSC RGD/FLX W/RMVL FOREIGN BODY
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43216	#N/A	ESPHGSC RGD/FLX RMVL TUM HOT BX FORCEPS/CAUT
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43217	#N/A	ESPHGSC RGD/FLX W/RMVL TUMOR SNARE TECHNIQUE
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43219	#N/A	ESPHGSC RGD/FLX W/INSJ PLSTC TUBE/STENT
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43220	#N/A	ESPHGSC RGD/FLX W/BALLOON DILAT < 30 MM DIAM
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43226	#N/A	ESPHGSC RGD/FLX W/INSJ GUIDE WIRE DILATION
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43227	#N/A	ESPHGSC RGD/FLX W/CTRL BLEEDING
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43228	#N/A	ESPHGSC RGD/FLX ABLTI TUM XCP HOT BX/CAUT/SNARE
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43234	#N/A	UPPER GI ENDOSCOPY SIMPLE EXAMINATION
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43235	#N/A	UPPER GI NDSC DX W/WO COLLECTION SPECIMEN
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43236	#N/A	UPPER GI NDSC W/SUBMUCOSAL INJECTION
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43237	#N/A	UPR GI NDSC & US NDSC EXAM LMTD ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43238	#N/A	UPR GI NDSC TNDSC US FINE NDL ASPIR/BX ESOPH
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43239	#N/A	UPPER NDSC BIOPSY SINGLE/MULTIPLE
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43240	#N/A	UPR GI NDSC TRANSMURAL DRAINAGE PSEUDOCYST
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43241	#N/A	UPR GI NDSC TNDSC INTRALUMINAL TUBE/CATH PLMT
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43242	#N/A	UPPER GI NDSC ULTRASOUND GUIDED BIOPSY
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43243	#N/A	UPR GI NDSC NIX SCLEROSIS ESOPHGL&GSTR VARICES
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43244	#N/A	UPR GI NDSC BAND LIG ESOPHGL&GSTR VARICES
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43245	#N/A	UPR GI NDSC DILAT GSTR OUTLET FOR OBSTRCI
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43246	#N/A	UPR GI NDSC PLMT PRQ GASTROSTOMY TUBE
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43247	#N/A	UPPER GI NDSC W/FOREIGN BODY REMOVAL
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43248	#N/A	UPR GI NDSC INSJ GUIDE WIRE DILAT ESOPHAGUS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43249	#N/A	UPR GI NDSC BALLOON DILAT ESOPH < 30 MM DIAM
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43250	#N/A	UPR GI NDSC RMVL LESION HOT BX/BIPOLAR CAUTERY
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43251	#N/A	UPR GI NDSC RMVL TUM POLY/P/OTH LES SNARE TQ
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43255	#N/A	UPR GI NDSC CONTROL BLEEDING ANY METHOD
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43258	#N/A	UPR GI NDSC ABLTI LES X RMVL FORCEPS/CAUT/SNARE

622	NUMERATOR	ESOPHAGEAL PROCEDURES	43259	#N/A	UPPER GI NDSC W/NDSC ULTRASOUND EXAM
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43260	#N/A	ERCP DX W/WO COLLJ SPEC BRUSHING/WASHING SPX
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43260	#N/A	Endoscopic retrograde cholangiopancreatography (ERCP); diagnostic, with or without collection of specimen(s) by brushing or washing (separate procedure)
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43261	#N/A	ERCP W/BIOPSY SINGLE/MULTIPLE
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43261	#N/A	Endoscopic retrograde cholangiopancreatography (ERCP); with biopsy, single or multiple
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43262	#N/A	ERCP W/SPHINCTEROTOMY/PAPILLOTOMY
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43262	#N/A	Endoscopic retrograde cholangiopancreatography (ERCP); with sphincterotomy/papillotomy
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43263	#N/A	ERCP W/PRESSURE MEAS SPHINCTER ODDI
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43263	#N/A	Endoscopic retrograde cholangiopancreatography (ERCP); with pressure measurement of sphincter of Oddi (pancreatic duct or common bile duct)
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43264	#N/A	ERCP W/RMV/CALCULI BILIARY&/PANCREATIC DUCTS
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43264	#N/A	Endoscopic retrograde cholangiopancreatography (ERCP); with endoscopic retrograde removal of calculus/calculi from biliary and/or pancreatic ducts
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43265	#N/A	ERCP W/DSTRJ LITHOTRIPSY CALCULI ANY METHOD
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43265	#N/A	Endoscopic retrograde cholangiopancreatography (ERCP); with endoscopic retrograde destruction, lithotripsy of calculus/calculi, any method
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43267	#N/A	ERCP W/INSI NASOBILIARY/NASOPNCRCT DRAINAGE TUBE
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43267	#N/A	Endoscopic retrograde cholangiopancreatography (ERCP); with endoscopic retrograde insertion of nasobiliary or nasopancreatic drainage tube
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43268	#N/A	ERCP W/INSI TUBE/STENT BILE/PANCREATIC DUCT
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43268	#N/A	Endoscopic retrograde cholangiopancreatography (ERCP); with endoscopic retrograde insertion of tube or stent into bile or pancreatic duct
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43269	#N/A	ERCP W/RTRGR RMVL FB&/CHNG TUBE/STENT
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43269	#N/A	Endoscopic retrograde cholangiopancreatography (ERCP); with endoscopic retrograde removal of foreign body and/or change of tube or stent
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43271	#N/A	Endoscopic retrograde cholangiopancreatography (ERCP); with endoscopic retrograde balloon dilation of ampulla, biliary and/or pancreatic duct(s)
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43271	#N/A	Endoscopic retrograde cholangiopancreatography (ERCP); with endoscopic retrograde balloon dilation of ampulla, biliary and/or pancreatic duct(s)
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43272	#N/A	Endoscopic retrograde cholangiopancreatography (ERCP); with ablation of tumor(s), polyp(s), or other lesion(s) not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43272	#N/A	Endoscopic retrograde cholangiopancreatography (ERCP); with ablation of tumor(s), polyp(s), or other lesion(s) not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique
622	NUMERATOR	GASTRECTOMY	43620	#N/A	GSTRCT TOT W/ESOPHAGOENTEROSTOMY
622	NUMERATOR	GASTRECTOMY	43621	#N/A	GSTRCT TOT W/ROUX-EN-Y RCNSTJ
622	NUMERATOR	GASTRECTOMY	43622	#N/A	GSTRCT TOT W/FRMJ INSTINAL POUCH ANY TYPE
622	NUMERATOR	GASTRECTOMY	43631	#N/A	GSTRCT PRTL DSTL W/GASTRODUODENOSTOMY
622	NUMERATOR	GASTRECTOMY	43632	#N/A	GSTRCT PRTL DSTL W/GASTROEJUNOSTOMY
622	NUMERATOR	GASTRECTOMY	43633	#N/A	GSTRCT PRTL DSTL W/ROUX-EN-Y RCNSTJ
622	NUMERATOR	GASTRECTOMY	43634	#N/A	GSTRCT PRTL DSTL W/FRMJ INSTINAL POUCH
622	NUMERATOR	GASTRECTOMY	43635	#N/A	VAGOTOMY PFRMD W/PRTL DSTL GSTRCT
622	NUMERATOR	GASTRECTOMY	43638	#N/A	GASTRECTOMY, PARTIAL, W/ ESOPHAGOGASTROSTOMY, VA
622	NUMERATOR	GASTRECTOMY	43639	#N/A	GASTRECTOMY, PARTIAL, W/ ESOPHAGOGASTROSTOMY,VAG
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	43644	#N/A	LAPS GSTR RSTCV PX W/BYP ROUX-EN-Y LIMB
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	43645	#N/A	LAPS GSTR RSTCV PX W/BYP&SM INT RCNSTJ
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	43770	#N/A	LAPS GASTRIC RESTRICTIVE PROCEDURE PLACE DEVICE
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	43771	#N/A	LAPS GASTRIC RESTRICTIVE PX REVISION DEVICE
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	43772	#N/A	LAPS GASTRIC RESTRICTIVE PX REMOVE DEVICE
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	43773	#N/A	LAPS GASTRIC RESTRICTIVE PX REMOVE&RPLCMT DEVICE
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	43774	#N/A	LAPS GASTRIC RESTRICTIVE PX REMOVE DEVICE &PORT
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	43842	169943	GASTRIC RSTCV W/O BYP VERTICAL-BANDED GASTROPLY
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	43843	#N/A	GSTR RSTCV W/O BYP OTH/THN VER-BANDED GSP
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	43845	#N/A	GASTRIC RSTCV W/PRTL GASTRECTOMY 50-100 CM
622	NUMERATOR	GASTRECTOMY	43845	#N/A	GASTRIC RSTCV W/PRTL GASTRECTOMY 50-100 CM
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	43846	#N/A	GASTRIC RSTCV W/BYP W/SHORT LIMB 150 CM/<
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	43847	#N/A	GASTRIC RSTCV W/BYP W/SM INT RCNSTJ LIMIT ABRSPJ
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	43848	#N/A	REVISION OPEN GASTRIC RESTRICTIVE PX NOT DEVICE
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	43886	#N/A	GSTR RSTCV PX OPN REVJ SUBQ PORT COMPONENT ONLY
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	43887	#N/A	GSTR RSTCV PX OPN RMVL SUBQ PORT COMPONENT ONLY
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	43888	#N/A	GSTR RSTCV OPN RMVL&RPLCMT SUBQ PORT
622	NUMERATOR	ESOPHAGEAL PROCEDURES	44360	#N/A	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, not including ileum; diagnostic, with or without collection of specimen(s) by brushing or washing (separate procedure)
622	NUMERATOR	ESOPHAGEAL PROCEDURES	44361	#N/A	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, not including ileum; with biopsy, single or multiple
622	NUMERATOR	ESOPHAGEAL PROCEDURES	44363	#N/A	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, not including ileum; with removal of foreign body
622	NUMERATOR	ESOPHAGEAL PROCEDURES	44364	#N/A	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, not including ileum; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique
622	NUMERATOR	ESOPHAGEAL PROCEDURES	44365	#N/A	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, not including ileum; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery
622	NUMERATOR	ESOPHAGEAL PROCEDURES	44366	#N/A	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, not including ileum; with control of bleeding (eg, injection, bipolar cautery, unipolar cautery, laser, heater probe, stapler, plasma coagulator)
622	NUMERATOR	ESOPHAGEAL PROCEDURES	44369	#N/A	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, not including ileum; with ablation of tumor(s), polyp(s), or other lesion(s) not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique
622	NUMERATOR	ESOPHAGEAL PROCEDURES	44370	#N/A	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, not including ileum; with transendoscopic stent placement (includes predilation)
622	NUMERATOR	ESOPHAGEAL PROCEDURES	44372	#N/A	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, not including ileum; with placement of percutaneous jejunostomy tube

622	NUMERATOR	ESOPHAGEAL PROCEDURES	44373	#N/A	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, not including ileum; with conversion of percutaneous gastrostomy tube to percutaneous jejunostomy tube
622	NUMERATOR	ESOPHAGEAL PROCEDURES	44376	#N/A	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, including ileum; diagnostic, with or without collection of specimen(s) by brushing or washing (separate procedure)
622	NUMERATOR	ESOPHAGEAL PROCEDURES	44377	#N/A	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, including ileum; with biopsy, single or multiple
622	NUMERATOR	ESOPHAGEAL PROCEDURES	44378	#N/A	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, including ileum; with control of bleeding (eg, injection, bipolar cautery, unipolar cautery, laser, heater probe, stapler, plasma coagulator)
622	DENOMINATOR	PUD/GERD DRUGS	44929	#N/A	cimetidine - SUSPENSION, ORAL (FINAL DOSE FORM) 200MG/20ML
622	DENOMINATOR	PUD/GERD DRUGS	47134	#N/A	famotidine-Ca carb-mag hydrox - TABLET, CHEWABLE 10-800-185
622	DENOMINATOR	PUD/GERD DRUGS	47525	#N/A	esomeprazole magnesium - CAPSULE,DELAYED RELEASE (ENTERIC COATED) 20 MG
622	DENOMINATOR	PUD/GERD DRUGS	47526	#N/A	esomeprazole magnesium - CAPSULE,DELAYED RELEASE (ENTERIC COATED) 40 MG
622	DENOMINATOR	PUD/GERD DRUGS	47635	#N/A	pantoprazole - VIAL (SDV,MDV OR ADDITIVE) (EA) 40 MG
622	NUMERATOR	GASTRECTOMY	48150	#N/A	PNCRTECT PROX STOT W/PANCREATOEJUNOSTOMY
622	NUMERATOR	GASTRECTOMY	48152	#N/A	PNCRTECT WHIPPLE W/O PANCREATOEJUNOSTOMY
622	DENOMINATOR	PUD/GERD DRUGS	48387	#N/A	ranitidine HCl (bulk) - POWDER (GRAM)
622	DENOMINATOR	PUD/GERD DRUGS	49296	#N/A	lansoprazole - SUSPENSION,DELAYED RELEASE,RECONST. 15 MG
622	DENOMINATOR	PUD/GERD DRUGS	51653	#N/A	lansoprazole - TABLET,DISINTEGRATING, DELAYED RELEASE 15 MG
622	DENOMINATOR	PUD/GERD DRUGS	51654	#N/A	lansoprazole - TABLET,DISINTEGRATING, DELAYED RELEASE 30 MG
622	DENOMINATOR	PUD/GERD DRUGS	52015	#N/A	omeprazole (bulk) - POWDER (GRAM) 100 %
622	DENOMINATOR	PUD/GERD DRUGS	53502	#N/A	famotidine (bulk) - POWDER (GRAM) 100 %
622	DENOMINATOR	PUD/GERD DRUGS	53718	#N/A	esomeprazole sodium - VIAL (SDV,MDV OR ADDITIVE) (EA) 40 MG
622	DENOMINATOR	PUD/GERD DRUGS	53916	#N/A	ranitidine HCl - TABLET, EFFERVESCENT 25 MG
622	DENOMINATOR	PUD/GERD DRUGS	54334	#N/A	omeprazole - TABLET, DELAYED RELEASE (ENTERIC COATED) 20 MG
622	DENOMINATOR	PUD/GERD DRUGS	54719	#N/A	lansoprazole - VIAL (SDV,MDV OR ADDITIVE) (EA) 30 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	57155	#N/A	INSERTION UTERINE TANDEM8/VAGINAL OVOIDS
622	DENOMINATOR	PUD/GERD DRUGS	57862	#N/A	omeprazole - PACKET (EA) 20 MG
622	DENOMINATOR	PUD/GERD DRUGS	57867	#N/A	nizatidine - SOLUTION, ORAL 150MG/10ML
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	58346	#N/A	INSERTION HEYMAN CAPSULES CLINICAL BRACHYTHERAPY
622	DENOMINATOR	PUD/GERD DRUGS	58604	#N/A	famotidine in 0.9 % NaCl - DISPOSABLE SYRINGE (ML) 20 MG/10ML
622	DENOMINATOR	PUD/GERD DRUGS	58666	#N/A	omeprazole - PACKET (EA) 40 MG
622	DENOMINATOR	PUD/GERD DRUGS	58949	#N/A	esomeprazole sodium - VIAL (SDV,MDV OR ADDITIVE) (EA) 20 MG
622	DENOMINATOR	PUD/GERD DRUGS	59892	#N/A	cimetidine - VIAL WITH THREADED PORT (ML) 300 MG/2ML
622	DENOMINATOR	PUD/GERD DRUGS	60471	#N/A	omeprazole-sodium bicarbonate - CAPSULE (HARD, SOFT, ETC.) 20MG-1.1G
622	DENOMINATOR	PUD/GERD DRUGS	60472	#N/A	omeprazole-sodium bicarbonate - CAPSULE (HARD, SOFT, ETC.) 40MG-1.1G
622	DENOMINATOR	PUD/GERD DRUGS	60473	#N/A	omeprazole-sodium bicarbonate - PACKET (EA) 20-1680MG
622	DENOMINATOR	PUD/GERD DRUGS	60474	#N/A	omeprazole-sodium bicarbonate - PACKET (EA) 40-1680MG
622	DENOMINATOR	PUD/GERD DRUGS	62245	#N/A	esomeprazole magnesium - SUSP FOR RECON,DELAYED REL. IN A PACKET 20 MG
622	DENOMINATOR	PUD/GERD DRUGS	63048	#N/A	lansoprazole (bulk) - POWDER (GRAM) 100 %
622	DENOMINATOR	PUD/GERD DRUGS	63250	#N/A	famotidine (PF) - VIAL (SDV,MDV OR ADDITIVE) (ML) 20 MG/2 ML
622	DENOMINATOR	PUD/GERD DRUGS	63668	#N/A	esomeprazole magnesium - SUSP FOR RECON,DELAYED REL. IN A PACKET 10 MG
622	DENOMINATOR	PUD/GERD DRUGS	63700	O045	pantoprazole - GRANULES DELAYED RELEASE FOR SUSP PACKET 40 MG
622	DENOMINATOR	PUD/GERD DRUGS	64637	#N/A	famotidine - TABLET, CHEWABLE 20 MG
622	DENOMINATOR	PUD/GERD DRUGS	64774	#N/A	omeprazole magnesium - SUSP FOR RECON,DELAYED REL. IN A PACKET 2.5 MG
622	DENOMINATOR	PUD/GERD DRUGS	64775	#N/A	omeprazole magnesium - SUSP FOR RECON,DELAYED REL. IN A PACKET 10 MG
622	DENOMINATOR	PUD/GERD DRUGS	64793	O98911	dexlansoprazole - CAPSULE, DELAYED RELEASE, MULTIPHASIC 30 MG
622	DENOMINATOR	PUD/GERD DRUGS	64794	O9893	dexlansoprazole - CAPSULE, DELAYED RELEASE, MULTIPHASIC 60 MG
622	DENOMINATOR	PUD/GERD DRUGS	66090	O669	ranitidine HCl - SUSPENSION, RECONSTITUTED, ORAL (ML) 15 MG/ML
622	DENOMINATOR	PUD/GERD DRUGS	66328	#N/A	naproxen-esomeprazole - TABLET,IMMEDIATE & DELAY REL,MULTIPHASIC 500MG-20MG
622	DENOMINATOR	PUD/GERD DRUGS	66329	#N/A	naproxen-esomeprazole - TABLET,IMMEDIATE & DELAY REL,MULTIPHASIC 375MG-20MG
622	DENOMINATOR	PUD/GERD DRUGS	66403	#N/A	omeprazole magnesium - CAPSULE,DELAYED RELEASE (ENTERIC COATED) 20 MG
622	DENOMINATOR	PUD/GERD DRUGS	68329	#N/A	omeprazole - SUSPENSION, RECONSTITUTED, ORAL (ML) 2 MG/ML
622	DENOMINATOR	PUD/GERD DRUGS	68365	#N/A	lansoprazole - SUSPENSION, RECONSTITUTED, ORAL (ML) 3 MG/ML
622	DENOMINATOR	PUD/GERD DRUGS	69882	#N/A	esomeprazole magnesium - SUSP FOR RECON,DELAYED REL. IN A PACKET 2.5 MG
622	DENOMINATOR	PUD/GERD DRUGS	69884	#N/A	esomeprazole magnesium - SUSP FOR RECON,DELAYED REL. IN A PACKET 5 MG
622	NUMERATOR	UPPER GI STUDY	74240	#N/A	RADEX GI TRACT UPPER W/WO DELAYED FILMS W/O KUB
622	NUMERATOR	UPPER GI STUDY	74241	#N/A	RADEX GI TRACT UPPER W/WO DELAYED FILMS W/KUB
622	NUMERATOR	UPPER GI STUDY	74245	#N/A	RADEX GI TRACT UPR W/SM INT W/MULT SERIAL FILMS
622	NUMERATOR	UPPER GI STUDY	74246	#N/A	RADEX UPPER GI W/WO GLUCAGON/DELAY FILMS W/O KUB
622	NUMERATOR	UPPER GI STUDY	74247	#N/A	RADEX UPPER GI W/WO GLUCAGON/DELAY FILMS W/KUB
622	NUMERATOR	UPPER GI STUDY	74249	#N/A	RADEX GI UPR W/WO GLUCOSE W/SM INTEST FOLLOW-THRU
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	76950	#N/A	Ultrasonic guidance for placement of radiation therapy fields
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77300	#N/A	BASIC RADIATION DOSIMETRY CALCULATION
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77301	#N/A	NTSTY MODUL RADTHX PLN DOSE-VOL HISTOS
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77305	#N/A	TELETHERAPY ISODOSE PLAN SIMPLE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77310	#N/A	TELETHERAPY ISODOSE PLAN INTERMEDIATE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77315	#N/A	TELETHERAPY ISODOSE PLAN COMPLETE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77321	#N/A	SPEC TELETHX PORT PLN PARTS HEMIBDY TOT BDY
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77326	#N/A	BRACHYTHERAPY ISODOSE PLAN SIMPLE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77327	#N/A	BRACHYTHERAPY ISODOSE PLAN INTERMEDIATE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77328	#N/A	BRACHYTHERAPY ISODOSE PLAN COMPLETE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77331	#N/A	SPEC DOSIM ONLY PRESCRIBED TREATING PHYS
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77332	#N/A	TX DEVICES DESIGN & CONSTRUCTION SIMPLE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77333	#N/A	TX DEVICES DESIGN & CONSTRUCTION INTERMEDIATE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77334	#N/A	TX DEVICES DESIGN & CONSTRUCTION COMPLEX
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77336	#N/A	CONTINUING MEDICAL PHYSICS CONSLT PR WK
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77370	#N/A	SPEC MEDICAL RADJ PHYSICS CONSLTJ
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77371	#N/A	RADIATION DELIVERY STEREOCTACTIC CRANIAL COBALT
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77372	#N/A	RADIATION DELIVERY STEREOCTACTIC CRANIAL LINEAR
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77373	#N/A	STEREOCTACTIC BODY RADIATION DELIVERY
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77399	#N/A	UNLIS MEDICAL RADJ DOSIM TX DEV SPEC SVCS
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77401	#N/A	RADIATION TX DELIVERY SUPERFICIAL&/ORTHO VOLTAGE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77402	#N/A	RADJ DLVR 1 AREA 1/PRLL OPSD PORTS SMPL <5MEV

622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77403	#N/A	RADI DLVR 1 AREA 1/PRLL OPSD PORTS SMPL 6-10MEV
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77404	#N/A	RADI DLVR 1 AREA 1/PRLL OPSD PORTS SMPL 11-19MEV
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77406	#N/A	RADI DLVR 1 AREA 1/PRLL OPSD PORTS SMPL 20MEV<
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77407	#N/A	RADI DLVR 2 AREAS 3/>PORTS 1 MLT BLKS <5MEV
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77408	#N/A	RADI DLVR 2 AREAS 3/>PORTS 1 MLT BLKS 6-11MEV
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77409	#N/A	RADI DLVR 2 AREAS 3/>PORTS 1 MLT BLKS 11-19MEV
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77411	#N/A	RADI DLVR 2 AREAS 3/> PORTS 1 TX AREA 20 MEV<
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77412	#N/A	RADI DLVR 3/> AREAS CUSTOM BLKING <5MEV
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77413	#N/A	RADI DLVR 3/> AREAS CUSTOM BLKING 6-10MEV
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77414	#N/A	RADI DLVR 3/> AREAS CUSTOM BLKING 11-19MEV
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77416	#N/A	RADI DLVR 3/> AREAS CUSTOM BLKING 20MEV<
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77417	#N/A	THERAPEUTIC RADIOLOGY PORT FILMS
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77422	#N/A	HIGH ENERGY NEUTRON RADI TX DLVR 1 TX AREA
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77423	#N/A	HIGH ENERGY NEUTRON RADI TX DLVR 1/> ISOCENTER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77424	#N/A	INTRAOP RADIAI TX DELIVER XRAY SINGLE TX SESSION
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77425	#N/A	INTRAOP RADIAI TX DELIVER ELECTRONS SNGL TX SESS
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77427	#N/A	RADIATION TREATMENT MANAGEMENT 5 TREATMENTS
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77431	P598	RADIATION THERAPY MGMT 1/2 FRACTIONS ONLY
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77432	#N/A	STEREOTACTIC RADIATION TX MANAGEMENT CRANIAL LESION
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77435	#N/A	STEREOTACTIC BODY RADIATION MANAGEMENT
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77469	#N/A	INTRAOPERATIVE RADIATION TREATMENT MANAGEMENT
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77470	#N/A	SPECIAL TREATMENT PROCEDURE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77499	#N/A	UNLISTED PROCEDURE THERAPEUTIC RADIOLOGY TX MGMT
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77781	#N/A	REMOTE AFTERLOADING HIGH INTENSITY BRACHYTHERAPY
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77782	#N/A	REMOTE AFTERLOADING HIGH INTENSITY BRACHYTHERAPY
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77783	#N/A	REMOTE AFTERLOADING HIGH INTENSITY BRACHYTHERAPY
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77784	#N/A	REMOTE AFTERLOADING HIGH INTENSITY BRACHYTHERAPY
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77785	#N/A	REMOTE AFTLD RADIONUCLIDE BRACHYTX 1 CHANNEL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77786	#N/A	REMOTE AFTLD RADIONUCLIDE BRACHYTX 2-12 CHANNEL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77787	#N/A	REMOTE AFTLD RADIONUCLIDE BRACHYTX > 12 CHANNEL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	77799	#N/A	UNLISTED PROCEDURE CLINICAL BRACHYTHERAPY
622	NUMERATOR	UPPER GI STUDY	78261	R231	GASTRIC MUCOSA IMAGING
622	NUMERATOR	UPPER GI STUDY	78264	#N/A	GASTRIC EMPTYING STUDY
622	NUMERATOR	UPPER GI STUDY	91010	#N/A	ESOPHAGEAL MOTILITY STUDY W/INTERP&RPT
622	NUMERATOR	UPPER GI STUDY	91011	#N/A	ESOPHAGUS MOTILITY STUDY; W/ STIMULANT
622	NUMERATOR	UPPER GI STUDY	91012	#N/A	ESOPHAGUS MOTILITY STUDY; W/ ACID PERFUSION
					<i>Esophageal motility (manometric study of the esophagus and/or gastroesophageal junction) study with interpretation and report; with stimulation or perfusion (eg, stimulant, acid or alkali perfusion) (List separately in addition to code for primary procedure)</i>
622	NUMERATOR	ESOPHAGEAL PROCEDURES	91013	#N/A	
622	NUMERATOR	UPPER GI STUDY	91020	#N/A	GASTRIC MOTILITY MANOMETRIC STUDIES
622	NUMERATOR	UPPER GI STUDY	91052	#N/A	GASTRIC ANALYSIS TEST W/ INJECTION, STIMULANT
					<i>Gastrointestinal tract imaging, intraluminal (eg, capsule endoscopy), esophagus through ileum, with physician interpretation and report</i>
622	NUMERATOR	ESOPHAGEAL PROCEDURES	91110	#N/A	GI IMAG INTRALUMIN ESOPH-ILEUM PHYS INTERP/RPT
622	NUMERATOR	UPPER GI STUDY	91110	#N/A	
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	92974	#N/A	TCAT PLMT RADI DLVR DEV SBSQ C IV BRACHYTX
622	DENOMINATOR GENERAL EXCLUSION	SNF	94004	#N/A	VENTILATION ASSIST & MGMT NURSING FAC PR DAY
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	96401	#N/A	CHEMOTX ADMN SUBQ/IM NON-HORMONAL ANTI-NEO
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	96402	#N/A	CHEMOTX ADMN SUBQ/IM HORMONAL ANTI-NEO
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	96405	#N/A	CHEMOTHERAPY ADMINISTRATION INTRALESIONAL <7
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	96406	#N/A	CHEMOTHERAPY ADMINISTRATION INTRALESIONAL > 7
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	96408	#N/A	CHEMOTHERAPY ADMINISTRATION, IV, PUSH TECHNIQUE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	96409	#N/A	CHEMOTX ADMN IV PUSH TQ 1/1ST SBST/DRUG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	96411	#N/A	CHEMOTX ADMN IV PUSH TQ EA SBST/DRUG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	96413	#N/A	CHEMOTX ADMN IV NFS TQ UP 1 HR 1/1ST SBST/DRUG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	96415	#N/A	CHEMOTHERAPY ADMIN IV INFUSION TQ EA HR
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	96416	#N/A	CHEMOTX ADMN TQ INIT PROLNG CHEMOTX NFSUP PMP
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	96417	#N/A	CHEMOTX ADMN IV NFS TQ EA SEQL NFS TO 1 HR
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	96420	#N/A	CHEMOTHERAPY ADMIN INTRA-ARTERIAL PUSH TQ
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	96422	#N/A	CHEMOTHERAPY ADMIN INTRA-ARTERIAL INFUS <1 HR
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	96423	#N/A	CHEMOTHERAPY ADMIN INTRAARTERIAL INFUSION EA HR
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	96425	#N/A	CHEMOTX ADMN IA NFS > 8 HR PRBLE IMPLTBL PMP
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	96440	#N/A	CHEMOTX ADMN PLEURAL CAVITY REQ&W/THORACNTS
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	96450	#N/A	CHEMOTX ADMN CNS REQ SPINAL PUNCTURE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	96542	#N/A	CHEMOTX NIX SUBARACHND/INTRAVENTR RSVR 1/MULT
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	96545	#N/A	PROVISION, CHEMOTHERAPY AGENT
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	96549	#N/A	UNLISTED CHEMOTHERAPY PROCEDURE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	96910	#N/A	PHOTOCHEMOTX TAR&UVB/PETROLATUM/UVB
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	96912	#N/A	PHOTOCHEMOTX PSORALENS&ULTRAVIOLET PUVA
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	96913	#N/A	PHOTOCHEMOTHERAPY DERMATOSSES 4-8 HRS SUPERVISION
622	DENOMINATOR GENERAL EXCLUSION	SNF	99301	#N/A	NURSING FACILITY CARE, 3 KEY COMPONENTS:DETAILED
622	DENOMINATOR GENERAL EXCLUSION	SNF	99302	#N/A	NURSING FACILITY CARE, 3 KEY COMPONENTS:DETAILED
622	DENOMINATOR GENERAL EXCLUSION	SNF	99303	#N/A	NURSING FACILITY CARE, 3 KEY COMPONENTS:COMPREH
622	DENOMINATOR GENERAL EXCLUSION	SNF	99304	#N/A	INITIAL NURSING FACILITY CARE/DAY LOW SEVERITY
622	DENOMINATOR GENERAL EXCLUSION	SNF	99305	#N/A	INITIAL NURSING FACILITY CARE/DAY MODER SEVERITY
622	DENOMINATOR GENERAL EXCLUSION	SNF	99306	#N/A	INITIAL NURSING FACILITY CARE/DAY HIGH SEVERITY
622	DENOMINATOR GENERAL EXCLUSION	SNF	99307	#N/A	SBSQ NURSING FACILITY CARE/DAY E/M STABLE 10 MIN
622	DENOMINATOR GENERAL EXCLUSION	SNF	99308	#N/A	SBSQ NURSING FACIL CARE/DAY MINOR COMPL 15 MIN
622	DENOMINATOR GENERAL EXCLUSION	SNF	99309	#N/A	SBSQ NURSING FACIL CARE/DAY NEW PROBLEM 25 MIN
622	DENOMINATOR GENERAL EXCLUSION	SNF	99310	#N/A	SBSQ NURS FACIL CARE/DAY UNSTABL/NEW PROB 35 MIN
622	DENOMINATOR GENERAL EXCLUSION	SNF	99311	#N/A	SBSQNT NSG FACILITY CARE, 3 KEY COMPONENTS:PRO
622	DENOMINATOR GENERAL EXCLUSION	SNF	99312	#N/A	SBSQNT NSG FACILITY CARE, 2+ KEY COMPONENTS:EX
622	DENOMINATOR GENERAL EXCLUSION	SNF	99313	#N/A	SBSQNT NSG FACILITY CARE, 2+ KEY COMPONENTS:DE
622	DENOMINATOR GENERAL EXCLUSION	SNF	99315	#N/A	NURSING FACILITY DISCHARGE MANAGEMENT 30 MIN/<
622	DENOMINATOR GENERAL EXCLUSION	SNF	99316	#N/A	NURSING FACILITY DISCHARGE MANAGEMENT > 30 MIN
622	DENOMINATOR GENERAL EXCLUSION	SNF	99318	#N/A	E/M ANNUAL NURSING FACILITY ASSESS STABLE 30 MIN
622	DENOMINATOR GENERAL EXCLUSION	SNF	99321	#N/A	REST HOME VISIT, NEW PT 3 KEY COMPONENTS:PROB FO
622	DENOMINATOR GENERAL EXCLUSION	SNF	99322	#N/A	REST HOME VISIT,NEW PT 3 KEY COMPONENTS:EXPAND P
622	DENOMINATOR GENERAL EXCLUSION	SNF	99323	#N/A	REST HOME VISIT, NEW PT 3 KEY COMPONENTS:DETAILE
622	DENOMINATOR GENERAL EXCLUSION	SNF	99331	#N/A	REST HOME VISIT,EST PT 3 KEY COMPONENTS:PROB FOC
622	DENOMINATOR GENERAL EXCLUSION	SNF	99332	#N/A	REST HOME VISIT, EST PT 3 KEY COMPONENTS:EXPND P
622	DENOMINATOR GENERAL EXCLUSION	SNF	99333	#N/A	REST HOME VISIT, EST PT 3 KEY COMPONENTS:DETAIL
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	99377	#N/A	PHYS SUPVJ HOSPICE PT MO 15-29 MIN
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	99378	#N/A	PHYS SUPVJ HOSPICE PT MO 30 MIN/>
622	DENOMINATOR GENERAL EXCLUSION	SNF	99379	#N/A	PHYS SUPVJ NF PT MO 15-29 MIN
622	DENOMINATOR GENERAL EXCLUSION	SNF	99380	#N/A	PHYS SUPVJ NF PT MO 30 MIN/>
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	2145201	#N/A	VELBAN 10 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	2145501	#N/A	ONCOVIN 1 MG/ML AMPULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	2145601	#N/A	ONCOVIN 1 MG/ML AMPULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	2719401	#N/A	ONCOVIN 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	2719501	#N/A	ONCOVIN 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	2719601	#N/A	ONCOVIN 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	2719809	#N/A	ONCOVIN 1 MG/ML SYRINGE

622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	2719900	#N/A	ONCOVIN 2 MG/2 ML SYRINGE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	2719909	#N/A	ONCOVIN 1 MG/ML SYRINGE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	2750101	#N/A	GEMZAR 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	2750201	#N/A	GEMZAR 1 GRAM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	2762301	#N/A	ALIMTA 500 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	2764001	#N/A	ALIMTA 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	3232711	#N/A	YERVOY 50 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	3232822	#N/A	YERVOY 200 MG/40 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	4005301	#N/A	MATULONA 50 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	4110020	#N/A	XELODA 150 MG TABLET
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	4110051	#N/A	XELODA 150 MG TABLET
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	4110116	#N/A	XELODA 500 MG TABLET
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	4110150	#N/A	XELODA 500 MG TABLET
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	4110175	#N/A	XELODA 500 MG TABLET
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	4190406	#N/A	FLUOROURACIL 50 MG/ML AMPUL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	4193508	#N/A	FUDR 500 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	4197701	#N/A	FLUOROURACIL 50 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	5455426	#N/A	METHOTREXATE 2.5 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	5465091	#N/A	THIOTEPA 15 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	5465490	#N/A	METHOTREXATE 20 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	5939334	#N/A	NOVANTRONE 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	5939336	#N/A	NOVANTRONE 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	5939372	#N/A	NOVANTRONE 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	6056840	#N/A	ZOLINZA 100 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	6329822	#N/A	COSMEGEN 0.5 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	6461200	#N/A	ELSPAR 10,000 UNITS VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	6775331	#N/A	MUSTARGEN 10 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	7326031	#N/A	BEXXAR 14 MG/ML DOSIMETRIC
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	7326036	#N/A	BEXXAR 14 MG/ML THERAPEUTIC
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	7326101	#N/A	BEXXAR 131 IODINE DOSIMETRIC
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	7326201	#N/A	BEXXAR 131 IODINE THERAPEUTIC
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	7420101	#N/A	HYCANTIN 4 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	7420105	#N/A	HYCANTIN 4 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	7420511	#N/A	HYCANTIN 0.25 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	7420711	#N/A	HYCANTIN 1 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	7440101	#N/A	ARRANON 250 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	7440106	#N/A	ARRANON 250 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	8415501	#N/A	CERUBIDINE 20 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	8415502	#N/A	CERUBIDINE 20 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	8451001	#N/A	MYLOTARG 5 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	9037301	#N/A	CYTOSAR-U 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	9047301	#N/A	CYTOSAR-U 500 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	9084401	#N/A	ZANOSAR 1 GM STERILE POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	9094901	#N/A	URACIL MUSTARD 1 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	9111101	#N/A	CAMPTOSAR 40 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	9111102	#N/A	CAMPTOSAR 100 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	9306301	#N/A	CYTOSAR-U 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	9307001	#N/A	CYTOSAR-U 500 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	9329501	#N/A	CYTOSAR-U 1 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	9329601	#N/A	CYTOSAR-U 2 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	9509101	#N/A	ELLECE 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	9509301	#N/A	ELLECE 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	9752901	#N/A	CAMPTOSAR 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	9752902	#N/A	CAMPTOSAR 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	9752903	#N/A	CAMPTOSAR 100 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	9752904	#N/A	CAMPTOSAR 40 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	9752905	#N/A	CAMPTOSAR 300 MG/15 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13100691	#N/A	ADRIAMYCIN 10 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13101679	#N/A	ADRIAMYCIN 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13102691	#N/A	ADRUCIL 50 MG/ML AMPUL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13103691	#N/A	ADRUCIL 50 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13103695	#N/A	ADRUCIL 50 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13104694	#N/A	ADRUCIL 50 MG/ML BULK VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13105694	#N/A	ADRUCIL 50 MG/ML BULK VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13107694	#N/A	ADRIAMYCIN 20 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13108691	#N/A	ADRIAMYCIN RDF 10 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13109691	#N/A	ADRIAMYCIN RDF 20 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13109694	#N/A	ADRIAMYCIN RDF 20 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13110679	#N/A	ADRIAMYCIN RDF 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13111683	#N/A	ADRIAMYCIN RDF 150 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13113691	#N/A	ADRIAMYCIN-PFS 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13114691	#N/A	ADRIAMYCIN-PFS 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13114694	#N/A	ADRIAMYCIN-PFS 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13115679	#N/A	ADRIAMYCIN-PFS 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13116683	#N/A	ADRIAMYCIN-PFS 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13117687	#N/A	ADRIAMYCIN-PFS 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13123691	#N/A	ADRIAMYCIN-PFS 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13124691	#N/A	ADRIAMYCIN-PFS 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13125679	#N/A	ADRIAMYCIN-PFS 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13126683	#N/A	ADRIAMYCIN-PFS 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13128683	#N/A	ADRIAMYCIN-PFS 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13161678	#N/A	BLEOMYCIN SULFATE 15U VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13163686	#N/A	BLEOMYCIN SULFATE 30U VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13220001	#N/A	IDAMYCIN PFS 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13220101	#N/A	IDAMYCIN PFS 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13220201	#N/A	IDAMYCIN PFS 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13222686	#N/A	FOLEX LYOPHILIZED 25 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13223686	#N/A	FOLEX LYOPHILIZED 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13224686	#N/A	FOLEX LYOPHILIZED 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13225686	#N/A	FOLEX LYOPHILIZED 250 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13226686	#N/A	FOLEX-PFS 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13226691	#N/A	FOLEX-PFS 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13227686	#N/A	FOLEX-PFS 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13227691	#N/A	FOLEX-PFS 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13228686	#N/A	FOLEX-PFS 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13228691	#N/A	FOLEX-PFS 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13229686	#N/A	FOLEX PFS 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13229691	#N/A	FOLEX PFS 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13250694	#N/A	IDAMYCIN 5 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13251686	#N/A	IDAMYCIN 10 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13252686	#N/A	IDAMYCIN 20 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13253678	#N/A	IDAMYCIN PFS 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	13254686	#N/A	IDAMYCIN PFS 1 MG/ML VIAL



622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15321329	#N/A	PARAPLATIN 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15321330	#N/A	PARAPLATIN 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15321429	#N/A	PARAPLATIN 150 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15321430	#N/A	PARAPLATIN 150 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15321529	#N/A	PARAPLATIN 450 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15321530	#N/A	PARAPLATIN 450 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15321630	#N/A	PARAPLATIN 600 MG/60 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15322022	#N/A	PLATINOL-AQ 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15322026	#N/A	PLATINOL-AQ 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15322097	#N/A	PLATINOL-AQ 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15322122	#N/A	PLATINOL-AQ 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15322126	#N/A	PLATINOL-AQ 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15322197	#N/A	PLATINOL-AQ 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15323011	#N/A	CARBOPLATIN 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15323111	#N/A	CARBOPLATIN 150 MG/15 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15323211	#N/A	CARBOPLATIN 450 MG/45 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15323311	#N/A	CARBOPLATIN 600 MG/60 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15335122	#N/A	RUBEX 10 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15335222	#N/A	RUBEX 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15335322	#N/A	RUBEX 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15340420	#N/A	ETOPHOS 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15345620	#N/A	TAXOL 30 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15345699	#N/A	TAXOL 30 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15347520	#N/A	TAXOL 30 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15347527	#N/A	TAXOL 30 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15347530	#N/A	TAXOL 30 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15347620	#N/A	TAXOL 100 MG/16.7 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15347627	#N/A	TAXOL 100 MG/16.7 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15347630	#N/A	TAXOL 100 MG/16.7 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15347911	#N/A	TAXOL 300 MG/50 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15355410	#N/A	IFEX/MESNEX KIT
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15355427	#N/A	IFEX-MESNEX KIT
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15355610	#N/A	IFEX/MESNEX KIT
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15355626	#N/A	IFEX-MESNEX KIT
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15355741	#N/A	IFEX/MESNEX COMBO PACK
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15355801	#N/A	IFEX/MESNEX COMBO PACK
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15355841	#N/A	IFEX/MESNEX COMBO PACK
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15355941	#N/A	IFEX/MESNEX COMBO PACK
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15356410	#N/A	IFEX/MESNEX KIT
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15356415	#N/A	IFEX/MESNEX KIT
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	24059010	#N/A	ELOXATIN 50 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	24059120	#N/A	ELOXATIN 100 MG/20 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	24059240	#N/A	ELOXATIN 200 MG/40 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	24059602	#N/A	ELOXATIN 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	24059704	#N/A	ELOXATIN 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	24155001	#N/A	PHOTOFRIN 75 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	24582020	#N/A	OFORTA 10 MG TABLET
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	24582411	#N/A	JEVTANA 60 MG/1.5 ML KIT
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	26815110	#N/A	DTIC-DOME IV 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	26815120	#N/A	DTIC-DOME IV 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	26816115	#N/A	MITHRACIN 2,500 MCG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	52060101	#N/A	TICE BCG VACCINE AMPUL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	52060202	#N/A	BCG VACCINE (TICE STRAIN) VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	54412925	#N/A	CYCLOPHOSPHAMIDE 25 MG TAB
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	54413025	#N/A	CYCLOPHOSPHAMIDE 50 MG TABLET
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	54808925	#N/A	CYCLOPHOSPHAMIDE 25 MG TAB
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	54813025	#N/A	CYCLOPHOSPHAMIDE 50 MG TAB
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69007001	#N/A	OXALIPLATIN 100 MG/20 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69007401	#N/A	OXALIPLATIN 50 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69007601	#N/A	PACLITAXEL 100 MG/16.7 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69007801	#N/A	PACLITAXEL 300 MG/50 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69007901	#N/A	PACLITAXEL 30 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69008101	#N/A	CISPLATIN 100 MG/100 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69008407	#N/A	CISPLATIN 50 MG/50 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69008618	#N/A	CLADRIBINE 10 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69015201	#N/A	CYTARABINE 100 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69015202	#N/A	CYTARABINE 100 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69015301	#N/A	CYTARABINE 500 MG/25 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69015302	#N/A	CYTARABINE 500 MG/25 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69015401	#N/A	CYTARABINE 1000 MG/50 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69015501	#N/A	CYTARABINE 2 G/20 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69017001	#N/A	DOXORUBICIN 10 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69017101	#N/A	DOXORUBICIN 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69303020	#N/A	DOXORUBICIN 10 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69303120	#N/A	DOXORUBICIN 20 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69303220	#N/A	DOXORUBICIN 50 MG/25 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69303320	#N/A	DOXORUBICIN 150 MG/75 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69303420	#N/A	DOXORUBICIN 200 MG/100 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69385710	#N/A	GEMCITABINE HCL 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69385810	#N/A	GEMCITABINE HCL 1 GRAM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69385910	#N/A	GEMCITABINE HCL 2 GRAM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69814020	#N/A	XALKORI 250 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69814120	#N/A	XALKORI 200 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	69932122	#N/A	FLUDARABINE 50 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	71424301	#N/A	NIPENT 10 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	74148501	#N/A	ETOPOSIDE 100 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	74148502	#N/A	ETOPOSIDE 500 MG/25 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	74148503	#N/A	ETOPOSIDE 1,000 MG/50 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	74433501	#N/A	PACLITAXEL 30 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	74433502	#N/A	PACLITAXEL 100 MG/16.7 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	74433504	#N/A	PACLITAXEL 300 MG/50 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	74503203	#N/A	DAUNORUBICIN 20 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	74504001	#N/A	DOXORUBICIN 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	74504303	#N/A	DOXORUBICIN 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	74504601	#N/A	DOXORUBICIN 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	74507501	#N/A	DACARBAZINE 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	74507503	#N/A	DACARBAZINE 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	74564301	#N/A	TOPOSAR 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	74564601	#N/A	ETOPOSIDE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	74565301	#N/A	ETOPOSIDE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	74565601	#N/A	TOPOSAR 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	74565701	#N/A	TOPOSAR 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	74566701	#N/A	ETOPOSIDE 20 MG/ML VIAL



622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	75064005	#N/A	ONCASPAR 750 UNIT/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	75800120	#N/A	TAXOTERE 20 MG/0.5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	75800180	#N/A	TAXOTERE 80 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	75800301	#N/A	TAXOTERE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	75800404	#N/A	TAXOTERE 80 MG/4 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	75999508	#N/A	GLIADEL WAFER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	81004535	#N/A	ALKERAN 2 MG TABLET
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	81013093	#N/A	ALKERAN 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	81039001	#N/A	FLUOROURACIL 50 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	81039003	#N/A	FLUOROURACIL 50 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	81063535	#N/A	LEUKERAN 2 MG TABLET
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	81065601	#N/A	NAVELBINE 10 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	81065644	#N/A	NAVELBINE 10 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	81071325	#N/A	MYLERAN 2 MG TABLET
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	81088025	#N/A	THIOGUANINE TABLOID 40 MG TB
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	82415501	#N/A	CERUBIDINE 20 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	85124401	#N/A	TEMODAR 20 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	85124402	#N/A	TEMODAR 20 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	85124801	#N/A	TEMODAR 5 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	85124802	#N/A	TEMODAR 5 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	85124803	#N/A	TEMODAR 5 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	85125201	#N/A	TEMODAR 250 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	85125202	#N/A	TEMODAR 250 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	85125901	#N/A	TEMODAR 100 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	85125902	#N/A	TEMODAR 100 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	85136601	#N/A	TEMODAR 100 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	85136602	#N/A	TEMODAR 100 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	85138101	#N/A	TEMODAR 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	85141701	#N/A	TEMODAR 250 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	85142501	#N/A	TEMODAR 140 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	85142502	#N/A	TEMODAR 140 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	85143001	#N/A	TEMODAR 180 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	85143002	#N/A	TEMODAR 180 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	85151901	#N/A	TEMODAR 20 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	85151902	#N/A	TEMODAR 20 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	85300401	#N/A	TEMODAR 5 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	85300402	#N/A	TEMODAR 5 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	87050001	#N/A	CYTOXAN 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	87050041	#N/A	CYTOXAN 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	87050101	#N/A	CYTOXAN 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	87050141	#N/A	CYTOXAN 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	87050201	#N/A	CYTOXAN 500 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	87050241	#N/A	CYTOXAN 500 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	87050301	#N/A	CYTOXAN 50 MG TABLET
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	87050302	#N/A	CYTOXAN 50 MG TABLET
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	87050303	#N/A	CYTOXAN 50 MG TABLET
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	87050401	#N/A	CYTOXAN 25 MG TABLET
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	87050541	#N/A	CYTOXAN 1 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	87050641	#N/A	CYTOXAN 2 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	87054741	#N/A	CYTOXAN LYOPHILIZED 500 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	94532553	#N/A	METHOTREXATE 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	94532561	#N/A	METHOTREXATE 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	94532569	#N/A	METHOTREXATE 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	94534101	#N/A	VINCISTINE 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	94534201	#N/A	VINCISTINE 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	94534501	#N/A	VINCISTINE 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	162607003	#N/A	<i>Terminally ill - early stage</i>
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	162608008	#N/A	<i>Terminal illness - late stage</i>
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	163060001	#N/A	OXSORALEN 10 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	163060030	#N/A	OXSORALEN 10 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	163065050	#N/A	OXSORALEN-ULTRA 10 MG CAP
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	163065130	#N/A	8-MOP 10 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	172375377	#N/A	ONXOL 300 MG/50 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	172375396	#N/A	ONXOL 300 MG/50 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	172375473	#N/A	ONXOL 30 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	172375494	#N/A	ONXOL 30 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	172375531	#N/A	ONXOL 100 MG/16.7 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	172375576	#N/A	ONXOL 100 MG/16.7 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	172375675	#N/A	ONXOL 150 MG/25 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	172375695	#N/A	ONXOL 150 MG/25 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	173004535	#N/A	ALKERAN 2 MG TABLET
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	173013093	#N/A	ALKERAN 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	173033965	#N/A	BCG VACCINE AMPUL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	173063535	#N/A	LEUKERAN 2 MG TABLET
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	173065601	#N/A	NAVELBINE 10 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	173065644	#N/A	NAVELBINE 10 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	173071325	#N/A	MYLERAN 2 MG TABLET
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	173080409	#N/A	VOTRIENT 200 MG TABLET
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	173080802	#N/A	ARZERRA 100 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	173080805	#N/A	ARZERRA 100 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	173082101	#N/A	ARZERRA 1,000 MG/50 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	173082133	#N/A	ARZERRA 100 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	173088025	#N/A	TABLOID 40 MG TABLET
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	182306863	#N/A	FLUOROURACIL 50 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	186142013	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	186142113	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	186142212	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	186142304	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	186153013	#N/A	DOXORUBICIN 10 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	186153101	#N/A	DOXORUBICIN 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	186153231	#N/A	DOXORUBICIN 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	186153241	#N/A	DOXORUBICIN 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	186153261	#N/A	DOXORUBICIN 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	186153281	#N/A	DOXORUBICIN 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	186157131	#N/A	ETOPOSIDE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	186157512	#N/A	DOXORUBICIN 20 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	187065130	#N/A	8-MOP 10 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	187065142	#N/A	8-MOP 10 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	187395364	#N/A	FLUOROURACIL 50 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	205455426	#N/A	METHOTREXATE 2.5 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	205455626	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	205465302	#N/A	METHOTREXATE 1 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	205465490	#N/A	METHOTREXATE 20 MG VIAL

622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	205466692	#N/A	METHOTREXATE 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	205520394	#N/A	METHOTREXATE 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	205532526	#N/A	METHOTREXATE LPF 25 MG/ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	205532618	#N/A	METHOTREXATE LPF 25 MG/ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	205532719	#N/A	METHOTREXATE LPF 25 MG/ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	205532730	#N/A	METHOTREXATE LPF 25 MG/ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	205533734	#N/A	METHOTREXATE LPF 25 MG/ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	205533798	#N/A	METHOTREXATE LPF 25 MG/ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	205533834	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	205933792	#N/A	METHOTREXATE 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	205933894	#N/A	METHOTREXATE 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	205939334	#N/A	NOVANTRONE 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	205939336	#N/A	NOVANTRONE 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	205939372	#N/A	NOVANTRONE 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	209306022	#N/A	ETOPOSIDE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	209307020	#N/A	ETOPOSIDE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	209308020	#N/A	ETOPOSIDE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	209309020	#N/A	ETOPOSIDE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	247128910	#N/A	ELSPAR 10,000 UNITS VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	247139401	#N/A	ZANOSAR 1 GM POWDER VIAL
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	300936002	#N/A	Terminal illness
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	304216756	#N/A	CYTARABINE 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	304216858	#N/A	CYTARABINE 500 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	304216922	#N/A	DACARBAZINE 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	304217059	#N/A	DACARBAZINE 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	304217151	#N/A	DACARBAZINE 500 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	304217356	#N/A	FLOXURIDINE 500 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	304218155	#N/A	METHOTREXATE NA 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	304218256	#N/A	METHOTREXATE NA 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	304218358	#N/A	METHOTREXATE NA 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	304219622	#N/A	VINBLASTINE SULF 10 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	304219759	#N/A	VINBLASTINE 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	304219952	#N/A	VINCRIStINE 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	304220055	#N/A	VINCRIStINE 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	304220155	#N/A	VINCRIStINE 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	338399101	#N/A	IFEX 1 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	338399301	#N/A	IFEX 3 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	364244754	#N/A	VINBLASTINE SULF 10 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	364244851	#N/A	VINCRIStINE 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	364244852	#N/A	VINCRIStINE 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	364246753	#N/A	CYTARABINE 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	364246854	#N/A	CYTARABINE 500 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	364302853	#N/A	ETOPOSIDE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	378326694	#N/A	ETOPOSIDE 50 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	402102710	#N/A	VINBLASTINE SULF 10 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	402102801	#N/A	VINCRIStINE SU 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	402102802	#N/A	VINCRIStINE SU 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	409018101	#N/A	GEMCITABINE 1 GRAM/26.3 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	409018201	#N/A	GEMCITABINE 2 GRAM/52.6 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	409018301	#N/A	GEMCITABINE 200 MG/5.26 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	409018501	#N/A	GEMCITABINE HCL 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	409018601	#N/A	GEMCITABINE HCL 1 GRAM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	409018701	#N/A	GEMCITABINE HCL 2 GRAM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	409020102	#N/A	DOCETAXEL 20 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	409020110	#N/A	DOCETAXEL 80 MG/8 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	409020120	#N/A	DOCETAXEL 160 MG/16 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	409030201	#N/A	TOPOTECAN HCL 4 MG/4 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	409080101	#N/A	NIPENT 10 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	409112910	#N/A	CARBOPLATIN 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	409112911	#N/A	CARBOPLATIN 150 MG/15 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	409112912	#N/A	CARBOPLATIN 450 MG/45 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	418014820	#N/A	METHOTREXATE SODIUM 20 MG VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	418014920	#N/A	METHOTREXATE SODIUM 50 MG VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	418015220	#N/A	METHOTREXATE SODIUM 100 MG V
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	418016205	#N/A	VINBLASTINE SULF 10 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	418016301	#N/A	VINCRIStINE SU 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	418016302	#N/A	VINCRIStINE SU 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	418016305	#N/A	VINCRIStINE SU 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	418017110	#N/A	FLUOROURACIL 50 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	418019702	#N/A	METHOTREXATE SOD 25 MG/ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	418019704	#N/A	METHOTREXATE SOD 25 MG/ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	418019708	#N/A	METHOTREXATE SOD 25 MG/ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	418021502	#N/A	METHOTREXATE NA 2.5 MG/ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	418021602	#N/A	METHOTREXATE SOD 25 MG/ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	418022710	#N/A	DACARBAZINE 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	418022820	#N/A	DACARBAZINE 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469100161	#N/A	DOXORUBICIN 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469103005	#N/A	CYTARABINE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469103025	#N/A	CYTARABINE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469103050	#N/A	CYTARABINE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469148040	#N/A	METHOTREXATE 20 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469149040	#N/A	METHOTREXATE 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469152040	#N/A	METHOTREXATE 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469162030	#N/A	VINBLASTINE SULF 10 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469163000	#N/A	VINCRIStINE 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469163010	#N/A	VINCRIStINE 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469163030	#N/A	VINCRIStINE 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469171030	#N/A	FLUOROURACIL 50 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469171040	#N/A	FLUOROURACIL 50 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469171060	#N/A	FLUOROURACIL 50 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469171100	#N/A	FLUOROURACIL 50 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469197010	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469197020	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469197030	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469215010	#N/A	METHOTREXATE 2.5 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469216010	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469227030	#N/A	DACARBAZINE 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469228040	#N/A	DACARBAZINE 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469241020	#N/A	CYTARABINE 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469242030	#N/A	CYTARABINE 500 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469278030	#N/A	VINBLASTINE 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469288030	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469352000	#N/A	VINCRIStINE 1 MG/ML VIAL

622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469352010	#N/A	VINCISTINE 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469352020	#N/A	VINCISTINE 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469883020	#N/A	DOXORUBICIN 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469883130	#N/A	DOXORUBICIN 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	469883250	#N/A	DOXORUBICIN 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	555198414	#N/A	PACLITAXEL 100 MG/16.7 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	555198514	#N/A	PACLITAXEL 300 MG/50 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	591221911	#N/A	CARBOPLATIN 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	591222011	#N/A	CARBOPLATIN 150 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	591318902	#N/A	IRINOTECAN HCL 40 MG/2 ML INJ
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	591318926	#N/A	IRINOTECAN HCL 100 MG/5 ML INJ
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	591336266	#N/A	CARBOPLATIN 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	591333712	#N/A	CARBOPLATIN 150 MG/15 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	591333889	#N/A	CARBOPLATIN 450 MG/45 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	591345460	#N/A	CARBOPLATIN 600 MG/60 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	591346983	#N/A	EPIDUBICIN 50 MG/25 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	591347057	#N/A	EPIDUBICIN 200 MG/100 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	591356279	#N/A	GEMCITABINE HCL 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	591356355	#N/A	GEMCITABINE HCL 1 GRAM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	591368711	#N/A	CARBOPLATIN 450 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	641226241	#N/A	CYCLOPHOSPHAMIDE 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	641226341	#N/A	CYCLOPHOSPHAMIDE 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	641226441	#N/A	CYCLOPHOSPHAMIDE 500 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	641226541	#N/A	CYCLOPHOSPHAMIDE 1 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	702023110	#N/A	DOXORUBICIN 10 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	702023206	#N/A	DOXORUBICIN 20 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	702023301	#N/A	DOXORUBICIN 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	702023510	#N/A	DOXORUBICIN 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	702023606	#N/A	DOXORUBICIN 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	702023610	#N/A	DOXORUBICIN 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	702023701	#N/A	DOXORUBICIN 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	702023801	#N/A	DOXORUBICIN 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	702171030	#N/A	FLUOROURACIL 50 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703301513	#N/A	ADRUCLIL 50 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703301812	#N/A	ADRUCLIL 50 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703301912	#N/A	ADRUCLIL 50 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703306711	#N/A	EPIDUBICIN 50 MG/25 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703306911	#N/A	EPIDUBICIN 200 MG/100 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703315401	#N/A	BLEOMYCIN SULFATE 15 UNIT VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703315491	#N/A	BLEOMYCIN SULFATE 15 UNITS VIA
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703315501	#N/A	BLEOMYCIN SULFATE 30 UNIT VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703315591	#N/A	BLEOMYCIN SULFATE 30 UNITS VIA
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703324411	#N/A	CARBOPLATIN 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703324611	#N/A	CARBOPLATIN 150 MG/15 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703324811	#N/A	CARBOPLATIN 450 MG/45 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703324911	#N/A	CARBOPLATIN 600 MG/60 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703326401	#N/A	CARBOPLATIN 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703326601	#N/A	CARBOPLATIN 150 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703326801	#N/A	CARBOPLATIN 450 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703326871	#N/A	CARBOPLATIN 450 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703327401	#N/A	CARBOPLATIN 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703327601	#N/A	CARBOPLATIN 150 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703327801	#N/A	CARBOPLATIN 450 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703342711	#N/A	IFOSFAMIDE 1 GM/ 20 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703342911	#N/A	IFOSFAMIDE 3 GM/ 60 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703367101	#N/A	METHOTREXATE 50 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703367103	#N/A	METHOTREXATE 50 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703367301	#N/A	METHOTREXATE 100 MG/4 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703367501	#N/A	METHOTREXATE 250 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703367801	#N/A	METHOTREXATE 1 GRAM/40 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703398501	#N/A	OXALIPLATIN 50 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703398601	#N/A	OXALIPLATIN 100 MG/20 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703410048	#N/A	IFOSFAMIDE-MESNA KIT
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703410058	#N/A	IFOSFAMIDE-MESNA KIT
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703410068	#N/A	IFOSFAMIDE-MESNA KIT
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703410948	#N/A	IFOSFAMIDE-MESNA KIT
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703410958	#N/A	IFOSFAMIDE-MESNA KIT
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703410968	#N/A	IFOSFAMIDE-MESNA KIT
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703415411	#N/A	IDARUBICIN HCL 5 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703415491	#N/A	IDARUBICIN HCL 5 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703415511	#N/A	IDARUBICIN HCL 10 MG/10 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703415591	#N/A	IDARUBICIN HCL 10 MG/10 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703415611	#N/A	IDARUBICIN HCL 20 MG/20 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703415691	#N/A	IDARUBICIN HCL 20 MG/20 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703418201	#N/A	VINORELBINE 10 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703418281	#N/A	VINORELBINE 10 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703418291	#N/A	VINORELBINE 10 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703418301	#N/A	VINORELBINE 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703418381	#N/A	VINORELBINE 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703418391	#N/A	VINORELBINE 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703424401	#N/A	CARBOPLATIN 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703424601	#N/A	CARBOPLATIN 150 MG/15 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703424801	#N/A	CARBOPLATIN 450 MG/45 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703430102	#N/A	THIOTEPA 15 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703430301	#N/A	THIOTEPA 30 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703440211	#N/A	VINCISTINE 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703441211	#N/A	VINCASAR PFS 2 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703443211	#N/A	IRINOTECAN HCL 40 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703443411	#N/A	IRINOTECAN HCL 100 MG/5 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703443491	#N/A	IRINOTECAN HCL 100 MG/5 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703443711	#N/A	IRINOTECAN HCL 500 MG/25 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703463601	#N/A	ZANOSAR 1 GM POWDER VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703468001	#N/A	MITOXANTRONE 25 MG/12.5 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703468091	#N/A	MITOXANTRONE 25 MG/12.5 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703468501	#N/A	MITOXANTRONE 20 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703468591	#N/A	MITOXANTRONE 20 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703468601	#N/A	MITOXANTRONE 30 MG/15 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703468691	#N/A	MITOXANTRONE 30 MG/15 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703476401	#N/A	PACLITAXEL 30 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703476601	#N/A	PACLITAXEL 100 MG/16.7 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703476701	#N/A	PACLITAXEL 150 MG/25 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703476801	#N/A	PACLITAXEL 300 MG/50 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703485211	#N/A	FLUDARABINE 50 MG/2 ML VIAL

622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703485281	#N/A	FLUDARABINE 50 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703485291	#N/A	FLUDARABINE 50 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703503203	#N/A	DAUNORUBICIN 20 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703504001	#N/A	DOXORUBICIN 200 MG/100 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703504303	#N/A	DOXORUBICIN 10 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703504601	#N/A	DOXORUBICIN 50 MG/25 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703507501	#N/A	DACARBAZINE 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703507503	#N/A	DACARBAZINE 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703518203	#N/A	CYTARABINE 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703519302	#N/A	CYTARABINE 500 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703519401	#N/A	CYTARABINE 1 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703519501	#N/A	CYTARABINE 2 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703523311	#N/A	DAUNORUBICIN 20 MG/4 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703523313	#N/A	DAUNORUBICIN 20 MG/4 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703523411	#N/A	DAUNORUBICIN 5 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703564301	#N/A	ETOPOSIDE 100 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703564601	#N/A	ETOPOSIDE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703565301	#N/A	TOPOSAR 100 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703565601	#N/A	TOPOSAR 500 MG/25 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703565701	#N/A	TOPOSAR 1,000 MG/50 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703566701	#N/A	ETOPOSIDE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703566801	#N/A	ETOPOSIDE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703574711	#N/A	CISPLATIN 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703574811	#N/A	CISPLATIN 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703577501	#N/A	GEMCITABINE HCL 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703577801	#N/A	GEMCITABINE HCL 1 GRAM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	703585401	#N/A	FLUDARABINE 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	781306672	#N/A	IRINOTECAN HCL 40 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	781306675	#N/A	IRINOTECAN HCL 100 MG/5 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	781328275	#N/A	GEMCITABINE HCL 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	781328379	#N/A	GEMCITABINE HCL 1 GRAM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	955102001	#N/A	DOCETAXEL 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	955102104	#N/A	DOCETAXEL 80 MG/4 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019091001	#N/A	CISPLATIN 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019091002	#N/A	CISPLATIN 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019091201	#N/A	CARBOPLATIN 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019091202	#N/A	CARBOPLATIN 150 MG/15 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019091203	#N/A	CARBOPLATIN 450 MG/45 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019091501	#N/A	CARBOPLATIN 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019091601	#N/A	CARBOPLATIN 150 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019091615	#N/A	CARBOPLATIN 150 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019091701	#N/A	CARBOPLATIN 450 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019092001	#N/A	DOXORUBICIN 10 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019092102	#N/A	DOXORUBICIN 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019092501	#N/A	IFOSFAMIDE 1 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019092582	#N/A	IFOSFAMIDE 1 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019092602	#N/A	IFOSFAMIDE 3 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019092616	#N/A	IFOSFAMIDE 3 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019093001	#N/A	ETOPOSIDE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019093002	#N/A	ETOPOSIDE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019093401	#N/A	IRINOTECAN HCL 40 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019093402	#N/A	IRINOTECAN HCL 100 MG/5 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019093417	#N/A	IRINOTECAN HCL 40 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019093479	#N/A	IRINOTECAN HCL 100 MG/5 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019094001	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019094002	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019094101	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019095002	#N/A	FLUOROURACIL 50 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019095501	#N/A	CYCLOPHOSPHAMIDE 500 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019095550	#N/A	CYCLOPHOSPHAMIDE 500 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019095601	#N/A	CYCLOPHOSPHAMIDE 1 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019095616	#N/A	CYCLOPHOSPHAMIDE 1 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019095701	#N/A	CYCLOPHOSPHAMIDE 2 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019095711	#N/A	CYCLOPHOSPHAMIDE 2 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019097001	#N/A	VINORELBINE 10 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10019097002	#N/A	VINORELBINE 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10139006005	#N/A	CARBOPLATIN 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10139006015	#N/A	CARBOPLATIN 150 MG/15 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10139006045	#N/A	CARBOPLATIN 450 MG/45 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10139006101	#N/A	EPIDRUBICIN 200 MG/100 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10139006125	#N/A	EPIDRUBICIN 50 MG/25 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10139006202	#N/A	METHOTREXATE 50 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10139006210	#N/A	METHOTREXATE 250 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10139006240	#N/A	METHOTREXATE 1 GM/40 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10139006301	#N/A	FLUOROURACIL 5,000 MG/100 ML
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10139006310	#N/A	FLUOROURACIL 500 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10139006311	#N/A	FLUOROURACIL 500 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10139006312	#N/A	FLUOROURACIL 1,000 MG/20 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10139006320	#N/A	FLUOROURACIL 1,000 MG/20 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10139006350	#N/A	FLUOROURACIL 2,500 MG/50 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10518010207	#N/A	PACLITAXEL 30 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10518010208	#N/A	PACLITAXEL 100 MG/16.7 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10518010209	#N/A	PACLITAXEL 300 MG/50 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10518010310	#N/A	IRINOTECAN HCL 40 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10518010311	#N/A	IRINOTECAN HCL 100 MG/5 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10518010410	#N/A	EPIDRUBICIN 50 MG/25 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10518010411	#N/A	EPIDRUBICIN 200 MG/100 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10518010510	#N/A	MITOXANTRONE 20 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10518010511	#N/A	MITOXANTRONE 25 MG/12.5 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10518010512	#N/A	MITOXANTRONE 30 MG/15 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	10885000101	#N/A	DAUNOXOME 50 MG (2 MG/ML) VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	11793088001	#N/A	THERACYS 81 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	11793880201	#N/A	THERACYS 27 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	11994009002	#N/A	QUADRAMET VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	11994009003	#N/A	QUADRAMET VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15210006112	#N/A	CARBOPLATIN 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15210006312	#N/A	CARBOPLATIN 150 MG/15 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15210006612	#N/A	CARBOPLATIN 450 MG/45 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15210006712	#N/A	CARBOPLATIN 600 MG/60 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15210040335	#N/A	MITOXANTRONE 20 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15210040336	#N/A	MITOXANTRONE 25 MG/12.5 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	15210040337	#N/A	MITOXANTRONE 30 MG/15 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	16729009203	#N/A	GEMCITABINE HCL 200 MG VIAL

622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	16729010811	#N/A	MITOMYCIN 20 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	16729011431	#N/A	ETOPOSIDE 100 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	16729011505	#N/A	MITOMYCIN 5 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	16729011638	#N/A	MITOMYCIN 40 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	16729011711	#N/A	GEMCITABINE HCL 1 GRAM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	16729011838	#N/A	GEMCITABINE HCL 2 GRAM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	16729012049	#N/A	DOCETAXEL 20 MG/0.5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	16729022850	#N/A	DOCETAXEL 80 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	16729023165	#N/A	DOCETAXEL 160 MG/8 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	17156052401	#N/A	METASTRON VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	17314960001	#N/A	DOXIL 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	17314960002	#N/A	DOXIL 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	18111000202	#N/A	IRINOTECAN HCL 40 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	18111000203	#N/A	IRINOTECAN HCL 100 MG/5 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	23155017931	#N/A	IRINOTECAN HCL 40 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	23155017932	#N/A	IRINOTECAN HCL 100 MG/5 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	25021020002	#N/A	IRINOTECAN HCL 40 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	25021020005	#N/A	IRINOTECAN HCL 100 MG/5 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	25021020325	#N/A	EPIDUBICIN 50 MG/25 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	25021020351	#N/A	EPIDUBICIN 200 MG/100 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	25021020401	#N/A	VINORELBINE 10 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	25021020405	#N/A	VINORELBINE 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	25021020505	#N/A	FLUDARABINE 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	25021020606	#N/A	TOPOTECAN HCL 4 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	25021020661	#N/A	TOPOTECAN HCL 4 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	25021020810	#N/A	GEMCITABINE HCL 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	25021020950	#N/A	GEMCITABINE HCL 1 GRAM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	25021021120	#N/A	OXALIPLATIN 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	25021021250	#N/A	OXALIPLATIN 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	25021021305	#N/A	PACITAXEL 30 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	25021021317	#N/A	PACITAXEL 100 MG/16.7 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	25021021350	#N/A	PACITAXEL 300 MG/50 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	25021021402	#N/A	IRINOTECAN HCL 40 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	25021021405	#N/A	IRINOTECAN HCL 100 MG/5 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	25021082406	#N/A	TOPOTECAN HCL 4 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	30237890006	#N/A	PROVENGE INFUSION BAG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	38779002501	#N/A	FLUOROURACIL POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	38779002503	#N/A	FLUOROURACIL POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	38779002504	#N/A	FLUOROURACIL POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	38779002505	#N/A	FLUOROURACIL POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	38779002506	#N/A	FLUOROURACIL POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	38779002507	#N/A	FLUOROURACIL POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	38779002509	#N/A	FLUOROURACIL POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	38779002525	#N/A	FLUOROURACIL POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	38779003901	#N/A	METHOXSALEN POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	38779003906	#N/A	METHOXSALEN POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	38779003911	#N/A	METHOXSALEN POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	38779021203	#N/A	DACARBAZINE POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	38779021206	#N/A	DACARBAZINE POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	38779021211	#N/A	DACARBAZINE POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	38779021215	#N/A	DACARBAZINE POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	38779050603	#N/A	CYCLOPHOSPHAMIDE POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	38779050605	#N/A	CYCLOPHOSPHAMIDE POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	38779055303	#N/A	MITOMYCIN POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	38779055306	#N/A	MITOMYCIN POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	38779055309	#N/A	MITOMYCIN POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	38779115600	#N/A	CHLORAMBUCIL POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	38779115603	#N/A	CHLORAMBUCIL POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	38779115606	#N/A	CHLORAMBUCIL POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	39769001210	#N/A	FLUOROURACIL 50 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	39769001240	#N/A	FLUOROURACIL 50 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	39769001250	#N/A	FLUOROURACIL 50 MG/ML AMPUL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	39769001290	#N/A	FLUOROURACIL 50 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	41616017640	#N/A	OXALIPLATIN 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	41616017840	#N/A	OXALIPLATIN 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	44087152001	#N/A	NOVANTRONE 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	44087152501	#N/A	NOVANTRONE 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	44087153001	#N/A	NOVANTRONE 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	46026098301	#N/A	ISTODAX 10 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	47335008250	#N/A	LIPDOX 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	47335008350	#N/A	LIPDOX 50 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	47335015340	#N/A	GEMCITABINE HCL 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	47335015440	#N/A	GEMCITABINE HCL 1 GRAM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	47335017640	#N/A	OXALIPLATIN 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	47335017840	#N/A	OXALIPLATIN 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	47335028541	#N/A	DOCEFREZ 20 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	47335028641	#N/A	DOCEFREZ 80 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	48642904101	#N/A	BCG TICE VACCINE AMPUL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	48818000101	#N/A	FOLOTYN 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	48818000102	#N/A	FOLOTYN 40 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	49281088001	#N/A	THERACYS 81 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	49281088003	#N/A	THERACYS 81 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	49452317501	#N/A	FLUOROURACIL POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	49452317502	#N/A	FLUOROURACIL POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	49452317503	#N/A	FLUOROURACIL POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	49452317504	#N/A	FLUOROURACIL POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	49452460101	#N/A	METHOTREXATE POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	49452460102	#N/A	METHOTREXATE POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	49452460103	#N/A	METHOTREXATE POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	49452460104	#N/A	METHOTREXATE POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	49452460301	#N/A	METHOXSALEN CRYSTAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	49452460302	#N/A	METHOXSALEN CRYSTAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	50111096576	#N/A	CARBOPLATIN 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	50111096676	#N/A	CARBOPLATIN 150 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	50111096776	#N/A	CARBOPLATIN 450 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	50242005121	#N/A	RITUXAN 10 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	50242005306	#N/A	RITUXAN 10 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	50242005656	#N/A	HERCEPTIN 440 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	50242006001	#N/A	AVASTIN 100 MG/4 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	50242006002	#N/A	AVASTIN 400 MG/16 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	50242006101	#N/A	AVASTIN 400 MG/16 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	50242009001	#N/A	ZELBORAF 240 MG TABLET









622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	55390049101	#N/A	ETOPOSIDE 100 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	55390049201	#N/A	ETOPOSIDE 500 MG/25 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	55390049301	#N/A	ETOPOSIDE 1,000 MG/50 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	55390051405	#N/A	PACLITAXEL 30 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	55390051420	#N/A	PACLITAXEL 100 MG/16.7 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	55390051450	#N/A	PACLITAXEL 300 MG/50 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	55390080510	#N/A	CERUBIDINE 20 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	55390080610	#N/A	CYTARABINE 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	55390080710	#N/A	CYTARABINE 500 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	55390080801	#N/A	CYTARABINE 1 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	55390080901	#N/A	CYTARABINE 2 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	55513095401	#N/A	VECTIBIX 100 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	55513095501	#N/A	VECTIBIX 200 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	55513095601	#N/A	VECTIBIX 400 MG/20 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	56146030100	#N/A	DAUNOXOME 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	56146030101	#N/A	DAUNOXOME 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	56146030104	#N/A	DAUNOXOME 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	57665000202	#N/A	ONCASPAR 750 UNIT/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	57665033101	#N/A	DEPOCYT 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	57902024901	#N/A	ERWINAZE 10,000 UNITS VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	57902024905	#N/A	ERWINAZE 10,000 UNITS VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	57902086001	#N/A	QUADRAMET VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58063000170	#N/A	HEXALEN 50 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58063010001	#N/A	GLIADEL WAFER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58063060050	#N/A	DACOGEN 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58178000170	#N/A	HEXALEN 50 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58406051101	#N/A	RUBEX 10 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58406051201	#N/A	RUBEX 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58406051301	#N/A	RUBEX 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58406064003	#N/A	NOVANTRONE 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58406064005	#N/A	NOVANTRONE 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58406064007	#N/A	NOVANTRONE 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58406066102	#N/A	THIOPLEX 15 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58406066131	#N/A	THIOPLEX 15 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58406066201	#N/A	THIOPLEX 15 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58406066236	#N/A	THIOPLEX 15 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58406067101	#N/A	METHOTREXATE 20 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58406067103	#N/A	METHOTREXATE 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58406067105	#N/A	METHOTREXATE 1 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58406067301	#N/A	METHOTREXATE 20 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58406068114	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58406068117	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58406068312	#N/A	METHOTREXATE LPF 25 MG/ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58406068315	#N/A	METHOTREXATE LPF 25 MG/ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58406068316	#N/A	METHOTREXATE LPF 25 MG/ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58406068318	#N/A	METHOTREXATE LPF 25 MG/ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58406071112	#N/A	ETOPOSIDE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58406071418	#N/A	ETOPOSIDE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58468010001	#N/A	CLOLAR 20 MG/20 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58468010002	#N/A	CLOLAR 20 MG/20 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58468035701	#N/A	CAMPATH 30 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58468035703	#N/A	CAMPATH 30 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	58914015575	#N/A	PHOTOFRIN 75 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	59148007090	#N/A	BUSULFEX 60 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	59148007091	#N/A	BUSULFEX 60 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	59148007191	#N/A	BUSULFEX 60 MG/10 ML AMPUL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	59572010201	#N/A	VIDAZA 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	59572030101	#N/A	ALKERAN 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	59572030250	#N/A	ALKERAN 2 MG TABLET
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	59572098301	#N/A	ISTODAX 10 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	59676020101	#N/A	LEUSTATIN 10 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	59676096001	#N/A	DOXIL 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	59676096002	#N/A	DOXIL 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	59762257601	#N/A	IDARUBICIN PFS 5 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	59762258601	#N/A	IDARUBICIN PFS 10 MG/10 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	59762259601	#N/A	IDARUBICIN PFS 20 MG/20 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	59762509101	#N/A	EPIDUBICIN 50 MG/25 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	59762509301	#N/A	EPIDUBICIN 200 MG/100 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	59762752901	#N/A	IRINOTECAN HCL 40 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	59762752902	#N/A	IRINOTECAN HCL 100 MG/5 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	59911595801	#N/A	VINORELBINE 10 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	59911595901	#N/A	VINORELBINE 10 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	60115000801	#N/A	HOUVA-CAPS 10 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	60553011110	#N/A	TRISENOX 10 MG/10 ML AMPULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	60831308601	#N/A	NAVELBINE 10 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	60831308602	#N/A	NAVELBINE 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61379010001	#N/A	GLIADEL WAFER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61471029512	#N/A	DOXIL 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703030346	#N/A	CYTARABINE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703030350	#N/A	CYTARABINE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703030425	#N/A	CYTARABINE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703030436	#N/A	CYTARABINE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703030509	#N/A	CYTARABINE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703030538	#N/A	CYTARABINE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703030650	#N/A	MITOMYCIN 20 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703030906	#N/A	VINCISTINE 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703030916	#N/A	VINCISTINE 2 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703031018	#N/A	VINBLASTINE SULF 10 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703031922	#N/A	CYTARABINE 100 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703032322	#N/A	BLEOMYCIN SULFATE 30 UNIT VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703032722	#N/A	DACARBAZINE 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703033109	#N/A	FUDR 500 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703033218	#N/A	BLEOMYCIN SULFATE 15 UNIT VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703033918	#N/A	CARBOPLATIN 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703033922	#N/A	CARBOPLATIN 150 MG/15 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703033950	#N/A	CARBOPLATIN 450 MG/45 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703033956	#N/A	CARBOPLATIN 600 MG/60 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703033961	#N/A	CARBOPLATIN 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703033962	#N/A	CARBOPLATIN 150 MG/15 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703033963	#N/A	CARBOPLATIN 450 MG/45 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703034106	#N/A	VINORELBINE 10 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703034109	#N/A	VINORELBINE 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703034209	#N/A	PACLITAXEL 30 MG/5 ML VIAL

622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703034222	#N/A	PACITAXEL 100 MG/16.7 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703034250	#N/A	PACITAXEL 300 MG/50 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703034318	#N/A	MITOXANTRONE 20 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703034365	#N/A	MITOXANTRONE 25 MG/12.5 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703034366	#N/A	MITOXANTRONE 30 MG/15 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703034418	#N/A	FLUDARABINE 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703034735	#N/A	EPIDUBICIN HCL 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703034859	#N/A	EPIDUBICIN HCL 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703034909	#N/A	IRINOTECAN HCL 100 MG/5 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703034916	#N/A	IRINOTECAN HCL 40 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703034936	#N/A	IRINOTECAN HCL 500 MG/25 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703034961	#N/A	IRINOTECAN HCL 40 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703034962	#N/A	IRINOTECAN HCL 100 MG/5 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703035038	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703035901	#N/A	EPIDUBICIN 50 MG/25 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703035902	#N/A	EPIDUBICIN 200 MG/100 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703035959	#N/A	EPIDUBICIN 200 MG/100 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703035991	#N/A	EPIDUBICIN 150 MG/75 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703035992	#N/A	EPIDUBICIN 10 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703035993	#N/A	EPIDUBICIN 50 MG/25 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703036018	#N/A	CARBOPLATIN 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703036022	#N/A	CARBOPLATIN 150 MG/15 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703036050	#N/A	CARBOPLATIN 450 MG/45 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703036318	#N/A	OXALAPLATIN 50 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703036322	#N/A	OXALAPLATIN 100 MG/20 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703040707	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703040732	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703040804	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703040807	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703040813	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703040822	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703040832	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703040841	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703040858	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703040932	#N/A	FLUOROURACIL 50 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703040953	#N/A	FLUOROURACIL 50 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61703040967	#N/A	FLUOROURACIL 50 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	61958030101	#N/A	DAUNOXOME 2 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	62161000538	#N/A	BUSULFEX 6 MG/ML AMPUL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	62701080001	#N/A	NIPENT 10 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	62856000110	#N/A	HEXALEN 50 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	62856017708	#N/A	GLIADEL WAFER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	62856038901	#N/A	HALAVEN 1 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	62856060001	#N/A	DACOGEN 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	62991120001	#N/A	METHOTREXATE POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	62991120004	#N/A	METHOTREXATE POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	62991148601	#N/A	FLUOROURACIL POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	62991148602	#N/A	FLUOROURACIL POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	62991148603	#N/A	FLUOROURACIL POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	62991148604	#N/A	FLUOROURACIL POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	62991154501	#N/A	MITOMYCIN POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	62991154502	#N/A	MITOMYCIN POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	62991154503	#N/A	MITOMYCIN POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	62991284901	#N/A	CISPLATIN POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	62991284902	#N/A	CISPLATIN POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	62991289601	#N/A	METHOXSALEN CRYSTAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323010161	#N/A	DOXORUBICIN 200 MG/100 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323010210	#N/A	GEMCITABINE HCL 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323010351	#N/A	CISPLATIN 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323010364	#N/A	CISPLATIN 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323010365	#N/A	CISPLATIN 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323010391	#N/A	CISPLATIN 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323010395	#N/A	CISPLATIN 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323010405	#N/A	ETOPOSIDE 100 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323010425	#N/A	ETOPOSIDE 500 MG/25 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323010450	#N/A	ETOPOSIDE 1,000 MG/50 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323010465	#N/A	ETOPOSIDE 20 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323011710	#N/A	FLUOROURACIL 500 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323011720	#N/A	FLUOROURACIL 1,000 MG/20 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323011751	#N/A	FLUOROURACIL 2,500 MG/50 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323011761	#N/A	FLUOROURACIL 5,000 MG/100 ML
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323011908	#N/A	DAUNORUBICIN 20 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323012020	#N/A	CYTARABINE 100 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323012102	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323012104	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323012108	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323012110	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323012140	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323012250	#N/A	METHOTREXATE 1 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323012302	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323012310	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323012404	#N/A	DAUNORUBICIN 5 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323012550	#N/A	GEMCITABINE HCL 1 GRAM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323012553	#N/A	GEMCITABINE HCL 1 GRAM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323012600	#N/A	GEMCITABINE HCL 2 GRAM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323012710	#N/A	DACARBAZINE 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323012812	#N/A	DACARBAZINE 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323012820	#N/A	DACARBAZINE 200 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323013210	#N/A	MITOXANTRONE 20 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323013212	#N/A	MITOXANTRONE 25 MG/12.5 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323013215	#N/A	MITOXANTRONE 30 MG/15 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323013610	#N/A	BLEOMYCIN SULFATE 15 UNIT VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323013720	#N/A	BLEOMYCIN SULFATE 30 UNIT VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323014010	#N/A	CLADRIBINE 10 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323014210	#N/A	IFOSFAMIDE 1 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323014212	#N/A	IFOSFAMIDE 1 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323014507	#N/A	FLOXURIDINE 500 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323014801	#N/A	VINORELBINE 10 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323014805	#N/A	VINORELBINE 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323015100	#N/A	EPIDUBICIN 200 MG/100 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323015105	#N/A	EPIDUBICIN 10 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323015125	#N/A	EPIDUBICIN 50 MG/25 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323015175	#N/A	EPIDUBICIN 150 MG/75 ML VIAL

622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323016610	#N/A	CARBOPLATIN 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323016720	#N/A	CARBOPLATIN 150 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323016721	#N/A	CARBOPLATIN 150 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323016800	#N/A	CARBOPLATIN 450 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323016905	#N/A	CARBOPLATIN 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323016915	#N/A	CARBOPLATIN 150 MG/15 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323016945	#N/A	CARBOPLATIN 450 MG/45 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323017205	#N/A	CARBOPLATIN 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323017215	#N/A	CARBOPLATIN 150 MG/15 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323017245	#N/A	CARBOPLATIN 450 MG/45 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323017260	#N/A	CARBOPLATIN 600 MG/60 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323017420	#N/A	IFOSFAMIDE 1 GM/ 20 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323017460	#N/A	IFOSFAMIDE 3 GM/ 60 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323017530	#N/A	OXALIPLATIN 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323017650	#N/A	OXALIPLATIN 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323019002	#N/A	FLUDARABINE 50 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323019020	#N/A	MITOMYCIN 5 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323019120	#N/A	MITOMYCIN 5 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323019140	#N/A	MITOMYCIN 20 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323019202	#N/A	FLUDARABINE 50 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323019302	#N/A	IRINOTECAN HCL 40 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323019305	#N/A	IRINOTECAN HCL 100 MG/5 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323019405	#N/A	IDARUBICIN HCL 5 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323019410	#N/A	IDARUBICIN HCL 10 MG/10 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323019420	#N/A	IDARUBICIN HCL 20 MG/20 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323019606	#N/A	FLUDARABINE 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323027810	#N/A	VINBLASTINE 1 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323065010	#N/A	OXALIPLATIN 50 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323065020	#N/A	OXALIPLATIN 100 MG/20 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323076210	#N/A	TOPOTECAN HCL 4 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323076217	#N/A	TOPOTECAN HCL 4 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323076305	#N/A	PACLITAXEL 30 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323076316	#N/A	PACLITAXEL 100 MG/16.7 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323076350	#N/A	PACLITAXEL 300 MG/50 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323088305	#N/A	DOXORUBICIN 10 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323088310	#N/A	DOXORUBICIN 20 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63323088330	#N/A	DOXORUBICIN 50 MG/25 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63370009515	#N/A	FLUOROURACIL POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63370009525	#N/A	FLUOROURACIL POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63370009535	#N/A	FLUOROURACIL POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63370015410	#N/A	METHOTREXATE POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63370015415	#N/A	METHOTREXATE POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63370015425	#N/A	METHOTREXATE POWDER
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63459039008	#N/A	TREANDA 25 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63459039120	#N/A	TREANDA 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	63459060010	#N/A	TRISENOX 10 MG/10 ML AMPULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	64067021601	#N/A	UVADEX 20 MCG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	64370021001	#N/A	VINORELBINE 10 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	64370025001	#N/A	VINORELBINE 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	64370053201	#N/A	NAVELBINE 10 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	64370053202	#N/A	NAVELBINE 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	64370308601	#N/A	NAVELBINE 10 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	64370308602	#N/A	NAVELBINE 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	64406010303	#N/A	ZEVALIN Y-90 KIT
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	64406010404	#N/A	ZEVALIN IN-111 KIT
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66435041005	#N/A	TOPOTECAN HCL 4 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66479013501	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66479013509	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66479013611	#N/A	METHOTREXATE LPF 25 MG/ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66479013613	#N/A	METHOTREXATE LPF 25 MG/ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66479013619	#N/A	METHOTREXATE LPF 25 MG/ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66479013721	#N/A	METHOTREXATE SOD 20 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66479013929	#N/A	METHOTREXATE 1 GM VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66733094823	#N/A	ERBITUX 100 MG/50 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66733095823	#N/A	ERBITUX 200 MG/100 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758004001	#N/A	METHOTREXATE 50 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758004002	#N/A	METHOTREXATE 50 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758004008	#N/A	METHOTREXATE 250 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758004101	#N/A	METHOTREXATE 25 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758004201	#N/A	EPIDUBICIN 50 MG/25 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758004202	#N/A	EPIDUBICIN 200 MG/100 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758004301	#N/A	PACLITAXEL 30 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758004302	#N/A	PACLITAXEL 100 MG/16.7 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758004303	#N/A	PACLITAXEL 300 MG/50 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758004401	#N/A	FLUOROURACIL 500 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758004403	#N/A	FLUOROURACIL 500 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758004501	#N/A	VINORELBINE 10 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758004502	#N/A	VINORELBINE 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758004601	#N/A	FLUDARABINE 50 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758004701	#N/A	CARBOPLATIN 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758004702	#N/A	CARBOPLATIN 150 MG/15 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758004703	#N/A	CARBOPLATIN 450 MG/45 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758004704	#N/A	CARBOPLATIN 600 MG/60 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758004801	#N/A	IRINOTECAN HCL 40 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758004802	#N/A	IRINOTECAN HCL 100 MG/5 ML VL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758005001	#N/A	DOCETAXEL 20 MG/2 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758005002	#N/A	DOCETAXEL 80 MG/8 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758005003	#N/A	DOCETAXEL 160 MG/16 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758005301	#N/A	OXALIPLATIN 50 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66758005302	#N/A	OXALIPLATIN 100 MG/20 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66860010001	#N/A	CARBOPLATIN 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66860010101	#N/A	CARBOPLATIN 150 MG/15 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	66860010201	#N/A	CARBOPLATIN 450 MG/45 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	67211010201	#N/A	VIDAZA 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	67263056088	#N/A	TEMODAR 100 MG CAPSULE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	67286005308	#N/A	BUSULFEX 6 MG/ML AMPUL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	67286005408	#N/A	BUSULFEX 60 MG/10 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	67386041151	#N/A	ELSPAR 10,000 UNITS VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	67386081155	#N/A	COSMEGEN 0.5 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	67386091151	#N/A	MUSTARGEN 10 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	67457019501	#N/A	MELPHALAN HCL 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	67457021501	#N/A	MELPHALAN HCL 50 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	67457023802	#N/A	FLUDARABINE 50 MG/2 ML VIAL

622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	67800010131	#N/A	BEXXAR 14 MG/ML DOSIMETRIC
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	67800010132	#N/A	BEXXAR 14 MG/ML THERAPEUTIC
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	67800011110	#N/A	BEXXAR 131 IODINE DOSIMET
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	67800012110	#N/A	BEXXAR 131 IODINE THERAP
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	67817006112	#N/A	CARBOPLATIN 50 MG/5 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	67817006312	#N/A	CARBOPLATIN 150 MG/15 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	67817006612	#N/A	CARBOPLATIN 450 MG/45 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	67817006712	#N/A	CARBOPLATIN 600 MG/60 ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	67979000101	#N/A	VALSTAR 40 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	67979000102	#N/A	VALSTAR 40 MG/ML VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	68152010303	#N/A	ZEVALIN Y-90 VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	68152010404	#N/A	ZEVALIN IN-111 VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	68258903601	#N/A	XELODA 500 MG TABLET
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	68817013450	#N/A	ABRAXANE 100 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	76128015575	#N/A	PHOTOFRIN 75 MG VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	76388063550	#N/A	LEUKERAN 2 MG TABLET
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY	76388071325	#N/A	MYLERAN 2 MG TABLET
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	1655	#N/A	***HOSPICE SERVICE
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	1656	#N/A	***HOSPICE SERVICE
622	DENOMINATOR GENERAL EXCLUSION	SNF	9958	#N/A	***OTHER THERAPEUTIC SERVICES (EXTENSION OF 94X)
622	NUMERATOR	UPPER GI STUDY	0008T	#N/A	UPPER GI ENDOSCOPY, W/ ESOPHAGUS/STOMACH & DUODE
622	NUMERATOR	UPPER GI STUDY	0057T	#N/A	UPPER GI ENDOSCOPY, THERM ENERGY DELIV TO ESOPH/
622	NUMERATOR	ESOPHAGEAL PROCEDURES	00740	#N/A	ANES UPPER GI ENDOSCOPY PROXIMAL TO DUODENUM
622	NUMERATOR	UPPER GI STUDY	0133T	#N/A	UPR GI NSDC WMATRL NIX LWR ESOPHGL SPHNCTR
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	0155T	#N/A	LAPS IMPLTJ/ RPLCMT GASTRIC ELTRD < CURVATURE
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	0156T	#N/A	LAPS REVJ/RMVL GASTRIC ELTRD < CURVATURE
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	0157T	#N/A	LAPT IMPLTJ/ RPLCMT GASTRIC ELTRD < CURVATURE
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	0158T	#N/A	LAPT REVJ/RMVL GASTRIC ELTRD < CURVATURE
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	0162T	#N/A	ANALYSIS & PROGRAMMING GASTRIC NEUROSTIMULATOR
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	0182T	#N/A	HDR ELECTRONIC BRACHYTHERAPY PER FRACTION
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	0197T	#N/A	IFXJ LOC&Z&TRAKG TRGT/PT MTN DUR RADTX EA FXJ
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	0330	#N/A	RADIOLOGY-THERAPEUTIC AND/OR CHEMOTHERAPY ADMINISTRATION - General
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	0331	#N/A	RADIOLOGY-THERAPEUTIC AND/OR CHEMOTHERAPY ADMINISTRATION - Chemotherapy administration-Injected
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	0332	#N/A	RADIOLOGY-THERAPEUTIC AND/OR CHEMOTHERAPY ADMINISTRATION - Chemotherapy administration-Oral
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	0333	#N/A	RADIOLOGY-THERAPEUTIC AND/OR CHEMOTHERAPY ADMINISTRATION - Radiation therapy
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	0335	#N/A	RADIOLOGY-THERAPEUTIC AND/OR CHEMOTHERAPY ADMINISTRATION - Chemotherapy administration-IV
622	DENOMINATOR	PUD/GERD DRUGS	11665	#N/A	cimetidine - TABLET 200 MG
622	DENOMINATOR	PUD/GERD DRUGS	11666	#N/A	cimetidine - TABLET 300 MG
622	DENOMINATOR	PUD/GERD DRUGS	11675	#N/A	famotidine - VIAL (SDV,MDV OR ADDITIVE) (ML) 10 MG/ML
622	NUMERATOR	CANCER ESOPHAGEAL	150.0	#N/A	MALIGNANT NEOPLASM OF CERVICAL ESOPHAGUS
622	NUMERATOR	CANCER GASTRIC	151.0	#N/A	MALIGNANT NEOPLASM OF CARDIA
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	161.0	#N/A	MALIGNANT NEOPLASM OF GLOTTIS
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	196.0	#N/A	SEC&UNSPEC MALIG NEOPLASM NODES HEAD FACE&NECK
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	197.0	#N/A	SECONDARY MALIGNANT NEOPLASM OF LUNG
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	198.0	#N/A	SECONDARY MALIGNANT NEOPLASM OF KIDNEY
622	DENOMINATOR	PUD/GERD DRUGS	25721	#N/A	famotidine - TABLET, CHEWABLE 10 MG
622	DENOMINATOR	OBESITY	278.0	#N/A	Overweight and obesity
622	DENOMINATOR	OBESITY	278.00	E66.09 - E66.9	Obesity, unspecified
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	332.0	#N/A	PARALYSIS AGITANS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	332.0	#N/A	PARALYSIS AGITANS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	335.20	#N/A	AMYOTROPHIC LATERAL SCLEROSIS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	335.20	#N/A	AMYOTROPHIC LATERAL SCLEROSIS
622	DENOMINATOR	MU BMI	39156-5	#N/A	Body mass index (BMI) [Ratio]
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	4165F	#N/A	3D-CRT OR INTENSITY MODUL RAD THXPY RECVD
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	4181F	#N/A	CONFORMAL RADIATION THERAPY RECEIVED
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.0	#N/A	ESOPHAGOTOMY
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.10	#N/A	ESOPHAGOSTOMY NOT OTHERWISE SPECIFIED
622	NUMERATOR	ESOPHAGEAL PROCEDURES	42.40	#N/A	ESOPHAGECTOMY NOT OTHERWISE SPECIFIED
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	4200F	#N/A	EXTRNL BM RADIOTHXPY TO PROST W/WO NODAL IRRAD
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	4201F	#N/A	EXTRNL BM RADIOTHXPY W/WO NODAL IRRAD AS ADIV
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43201	#N/A	Esophagoscopy, rigid or flexible; with directed submucosal injection(s), any substance
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43231	#N/A	Esophagoscopy, rigid or flexible; with endoscopic ultrasound examination
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43232	#N/A	Esophagoscopy, rigid or flexible; with transendoscopic ultrasound-guided intramural or transmural fine needle aspiration/biopsy(s)
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43256	#N/A	Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; with transendoscopic stent placement (includes predilation)
622	NUMERATOR	ESOPHAGEAL PROCEDURES	43257	#N/A	Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; with delivery of thermal energy to the muscle of lower esophageal sphincter and/or gastric cardia, for treatment of gastroesophageal reflux disease
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	438.89	I69898	OTHER LATE EFFECTS OF CEREBROVASCULAR DISEASE
622	NUMERATOR	ESOPHAGEAL PROCEDURES	44.43	#N/A	Endoscopic control of gastric or duodenal bleeding
622	DENOMINATOR EXCLUSION	ESOPHAGEAL VARICES	456.0	#N/A	ESOPHAGEAL VARICES WITH BLEEDING
622	DENOMINATOR EXCLUSION	ESOPHAGEAL VARICES	456.20	#N/A	ESOPHAGEAL VARICES W/BLEED DISEASES CLASS ELSW
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.20	#N/A	UNSPECIFIED DISEASE OF PHARYNX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.20	#N/A	UNSPECIFIED DISEASE OF PHARYNX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.70	#N/A	UNSPECIFIED DISEASE OF LARYNX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	478.70	#N/A	UNSPECIFIED DISEASE OF LARYNX
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.0	#N/A	ACHALASIA AND CARDIOSPASM
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.10	#N/A	UNSPECIFIED ESOPHAGITIS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.10	#N/A	UNSPECIFIED ESOPHAGITIS
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.20	#N/A	ULCER OF ESOPHAGUS WITHOUT BLEEDING
622	DENOMINATOR EXCLUSION	DYSPHAGIA - MISC. CAUSES	530.20	#N/A	ULCER OF ESOPHAGUS WITHOUT BLEEDING
622	DENOMINATOR EXCLUSION	WEIGHT LOSS SURGERY (ICD9)	539.0	#N/A	COMPLICATIONS OF GASTRIC BAND PROCEDURE
622	DENOMINATOR	PUD/GERD DRUGS	58603	#N/A	famotidine in 0.9 % NaCl - DISPOSABLE SYRINGE (ML) 20 MG/5 ML

622	DENOMINATOR	PUD/GERD DRUGS	62246	#N/A	esomeprazole magnesium - SUSP FOR RECON,DELAYED REL IN A PACKET 40 MG
622	DENOMINATOR	DYSPHAGIA	787.20	#N/A	DYSPHAGIA UNSPECIFIED
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	92.20	#N/A	INFUSION OF LIQUID BRACHYTHERAPY RADIOISOTOPE
622	DENOMINATOR	PDD- GERD	AA.11214.41440	#N/A	What health conditions, if any, has your doctor said you have?: <b>GERD</b> Which of the following conditions does your child have?: <b>GERD (regurgitation or heartburn)</b>
622	DENOMINATOR	PDD- GERD	AA.11327.41806	#N/A	Which of the following conditions do you have?: <b>GERD (heartburn)</b>
622	DENOMINATOR	PDD- GERD	AA.1384.4080	#N/A	Have you been diagnosed or received treatment for any of the following conditions in the previous 6 months?: <b>Bariatric surgery within the past 2 years</b>
622	DENOMINATOR EXCLUSION	PDD- GASTRIC BYPASS SURGERY	AA.14812.55647	#N/A	INACTIVE Nurse completion: Select one answer for GERD: <b>CSID scores positive for GERD and patient confirms condition</b>
622	DENOMINATOR	PDD- GERD	AA.1580.4682	#N/A	INACTIVE Nurse completion: Select one answer for GERD: <b>CSID does not score positive for GERD and patient states they have condition</b>
622	DENOMINATOR	PDD- GERD	AA.1580.4684	#N/A	Have you had a test in the last 12 months where the doctor looks into your esophagus and stomach with a scope (EGD)?: <b>Yes</b>
622	NUMERATOR	PDD- EGD IN PAST 12 MTHS (OR UPPER GI STUDY)	AA.1651.4904	#N/A	Tell me about any of the following new or worsening symptoms of possible complications of GERD you may have had in the past 3 months or since our last call: <b>Dysphagia (difficulty swallowing) or odynophagia (painful swallowing)</b>
622	DENOMINATOR	PDD- GERD WARNING SYMPTOMS	AA.1659.4931	#N/A	Tell me about any of the following new or worsening symptoms of possible complications of GERD you may have had in the past 3 months or since our last call: <b>Unexplained weight loss &gt;5%</b>
622	DENOMINATOR	PDD- GERD WARNING SYMPTOMS	AA.1659.4932	#N/A	Tell me about any of the following new or worsening symptoms of possible complications of GERD you may have had in the past 3 months or since our last call: <b>INACTIVE GI bleeding (blood in stool/vomiting blood)</b>
622	DENOMINATOR	PDD- GERD WARNING SYMPTOMS	AA.1659.4935	#N/A	Tell me about any of the following new or worsening symptoms of possible complications of GERD you may have had in the past 3 months or since our last call: <b>Swallowing that is difficult/painful or a choking sensation</b>
622	DENOMINATOR	PDD- GERD	AA.1659.60220	#N/A	What health conditions does the member have?: <b>GERD</b>
622	DENOMINATOR	PDD- GERD	AA.20620.77103	#N/A	What health conditions does the member have?: <b>GERD</b>
622	DENOMINATOR	PDD- GERD	AA.20936.78274	#N/A	What conditions did the member confirm?: <b>GERD</b>
622	DENOMINATOR	PDD- GERD	AA.4206.14172	#N/A	Have you been diagnosed or received treatment for any of the following conditions in the previous 6 months?: <b>Bariatric surgery within the past 2 years</b>
622	DENOMINATOR EXCLUSION	PDD- GASTRIC BYPASS SURGERY	<a href="#">ACT.5000000312.4</a>	#N/A	Have you had a test in the last 12 months where the doctor looks into your esophagus and stomach with a scope (EGD)?: <b>Yes</b>
622	NUMERATOR	PDD- EGD IN PAST 12 MTHS (OR UPPER GI STUDY)	ACT.50000000642	#N/A	The following are warning signs of GERD. In the past 3 months or since our last encounter have you had new or worsening symptoms of any of these?: <b>Unexplained weight loss &gt;5%</b>
622	DENOMINATOR	PDD- GERD WARNING SYMPTOMS	ACT.50000000644.2	#N/A	The following are warning signs of GERD. In the past 3 months or since our last encounter have you had new or worsening symptoms of any of these?: <b>Swallowing that is difficult/painful or a choking sensation</b>
622	DENOMINATOR	PDD- GERD WARNING SYMPTOMS	ACT.50000000644.6	#N/A	What health conditions, if any, has your doctor said you have?: <b>GERD</b> Which of the following conditions does your child have?: <b>GERD (regurgitation or heartburn)</b>
622	DENOMINATOR	PDD- GERD	ATV.11214.41440	#N/A	Which of the following conditions do you have?: <b>GERD (heartburn)</b>
622	DENOMINATOR	PDD- GERD	ATV.11327.41806	#N/A	Have you been diagnosed or received treatment for any of the following conditions in the previous 6 months?: <b>Bariatric surgery within the past 2 years</b>
622	DENOMINATOR EXCLUSION	PDD- GASTRIC BYPASS SURGERY	ATV.14812.55647	#N/A	INACTIVE Nurse completion: Select one answer for GERD: <b>CSID scores positive for GERD and patient confirms condition</b>
622	DENOMINATOR	PDD- GERD	ATV.1580.4682	#N/A	INACTIVE Nurse completion: Select one answer for GERD: <b>CSID does not score positive for GERD and patient states they have condition</b>
622	DENOMINATOR	PDD- GERD	ATV.1580.4684	#N/A	Have you had a test in the last 12 months where the doctor looks into your esophagus and stomach with a scope (EGD)?: <b>Yes</b>
622	NUMERATOR	PDD- EGD IN PAST 12 MTHS (OR UPPER GI STUDY)	ATV.1651.4904	#N/A	Tell me about any of the following new or worsening symptoms of possible complications of GERD you may have had in the past 3 months or since our last call: <b>Dysphagia (difficulty swallowing) or odynophagia (painful swallowing)</b>
622	DENOMINATOR	PDD- GERD WARNING SYMPTOMS	ATV.1659.4931	#N/A	Tell me about any of the following new or worsening symptoms of possible complications of GERD you may have had in the past 3 months or since our last call: <b>Unexplained weight loss &gt;5%</b>
622	DENOMINATOR	PDD- GERD WARNING SYMPTOMS	ATV.1659.4932	#N/A	Tell me about any of the following new or worsening symptoms of possible complications of GERD you may have had in the past 3 months or since our last call: <b>INACTIVE GI bleeding (blood in stool/vomiting blood)</b>
622	DENOMINATOR	PDD- GERD WARNING SYMPTOMS	ATV.1659.4935	#N/A	Tell me about any of the following new or worsening symptoms of possible complications of GERD you may have had in the past 3 months or since our last call: <b>Swallowing that is difficult/painful or a choking sensation</b>
622	DENOMINATOR	PDD- GERD	ATV.20620.77103	#N/A	What health conditions does the member have?: <b>GERD</b>
622	DENOMINATOR	PDD- GERD	ATV.20936.78274	#N/A	What health conditions does the member have?: <b>GERD</b>
622	DENOMINATOR	PDD- GERD	ATV.4206.14172	#N/A	What conditions did the member confirm?: <b>GERD</b>
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	C1715	#N/A	BRACHYTHERAPY NEEDLE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	C1716	#N/A	BRACHYTHERAPY NONSTRANDED GOLD-198 PER SOURCE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	C1717	#N/A	BRACHYTHERAPY NONSTRANDED HI DOSE IRIIDIUM-192 PER SRC
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	C1719	#N/A	BRACHYTHERAPY NONSTRANDED NON-HD IRIIDIUM-192 PER SRC
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	C1728	#N/A	CATHETER BRACHYTHERAPY SEED ADMINISTRATION
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	C2616	#N/A	BRACHYTHERAPY NONSTRANDED YTRIUM-90 PER SOURCE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	C2634	#N/A	BRACHYTHERAPY NONSTRANDED IODINE-125 >1.01 MCI PER SRC
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	C2635	#N/A	BRACHYTHERAPY NONSTRANDED PALLADIUM-103 >2.2 MCI PER SRC
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	C2636	#N/A	BRACHYTHERAPY LINEAR NONSTRANDED PALLADIUM-103 PER 1 MM
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	C2637	#N/A	BRACHYTHERAPY NONSTRANDED YTTERBIUM-169 PER SOURCE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	C2638	#N/A	BRACHYTHERAPY STRANDED IODINE-125 PER SOURCE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	C2639	#N/A	BRACHYTHERAPY NONSTRANDED IODINE-125 PER SOURCE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	C2640	#N/A	BRACHYTHERAPY STRANDED PALLADIUM-103 PER SOURCE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	C2641	#N/A	BRACHYTHERAPY NONSTRANDED PALLADIUM-103 PER SRC
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	C2642	#N/A	BRACHYTHERAPY STRANDED CESIUM-131 PER SOURCE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	C2643	#N/A	BRACHYTHERAPY NONSTRANDED CESIUM-131 PER SOURCE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	C2698	#N/A	BRACHYTHERAPY SOURCE STRANDED NOS PER SOURCE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	C2699	#N/A	BRACHYTHERAPY SOURCE NONSTRANDED NOS PER SOURCE
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	G0182	#N/A	PHYS SUPV PT UNDER MEDICARE-APPROVED HOSPICE
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	G0337	#N/A	HOSPICE EVALUATION & CNSL SERVICES PREELECTION
622	NUMERATOR	ESOPHAGEAL PROCEDURES	G8250	#N/A	<i>Patient with suspicion of Barrett's esophagus in endoscopy report and documented to have received an esophageal biopsy</i>
622	NUMERATOR	ESOPHAGEAL PROCEDURES	G8251	#N/A	<i>Patient not documented to have received an esophageal biopsy when suspicion of Barrett's esophagus is indicated in the endoscopy report</i>

622	DENOMINATOR	PDD- OBESITY	HMI.1177.1	#N/A	Have you ever been diagnosed with any of the following?: <b>Obesity - Obesity</b>
622	DENOMINATOR	PDD- GERD	HMI.1190.1	#N/A	Have you ever been diagnosed with any of the following?: <b>GERD - Gastroesophageal Reflux Disease (GERD)</b>
622	DENOMINATOR	PDD- OBESITY	HMI.1196.1	#N/A	Have you ever been diagnosed with any of the following?: <b>Obesity - Obesity</b>
622	DENOMINATOR	PDD- OBESITY	HMI.2092.1	#N/A	Have you been diagnosed with any of the following? Select all that apply.: <b>true - Obesity</b>
622	DENOMINATOR	PDD- OBESITY	HMI.2697.1	#N/A	Do you have or have you been diagnosed with any of the following? Select all that apply.: <b>true - Obesity</b>
622	DENOMINATOR	PDD- OBESITY	HMI.2712.1	#N/A	Do you have, or have you been diagnosed with, any of the following? Select all that apply.: <b>true - Obesity</b>
622	DENOMINATOR	PDD- GERD	HMI.3187.1	#N/A	Which of the following conditions have you been DIAGNOSED with? Select all that apply.: <b>true - Acid Reflux/Gastroesophageal Reflux Disease (GERD)</b>
622	DENOMINATOR	PDD- OBESITY	HMI.3194.1	#N/A	Which of the following conditions have you been DIAGNOSED with? Select all that apply.: <b>true - Obesity</b>
622	DENOMINATOR	PDD- GERD	HMI.3212.1	#N/A	Which of the following conditions you have been TREATED for? Select all that apply.: <b>true - Acid Reflux/Gastroesophageal Reflux Disease (GERD)</b>
622	DENOMINATOR	PDD- GERD	HMI.3882.1	#N/A	Have you ever been diagnosed with any of the following? Choose all that apply.: <b>true - Gastroesophageal Reflux Disease (GERD)</b>
622	DENOMINATOR	PDD- OBESITY	HMI.3902.1	#N/A	Have you ever been diagnosed with any of the following? Choose all that apply.: <b>true - Obesity</b>
622	DENOMINATOR	PDD- GERD	HMI.3937.1	#N/A	Which of the following conditions have you been treated for? Choose all that apply.: <b>true - Acid Reflux/Gastroesophageal Reflux Disease (GERD)</b>
622	DENOMINATOR	PDD- OBESITY	HMI.4258.1	#N/A	Have you ever been diagnosed with any of the following? Choose all that apply.: <b>Obesity - Obesity</b>
622	DENOMINATOR	PDD- OBESITY	HMI.5184.1	#N/A	Have you been diagnosed with any of the following? Choose all that apply.: <b>Obesity - Obesity</b>
622	DENOMINATOR	PDD- OBESITY	HMI.5253.1	#N/A	Have you ever been diagnosed with any of the following? Choose all that apply.: <b>Obesity - Obesity</b>
622	DENOMINATOR	PDD- BMI	<a href="#">HMI.5547.1</a>	#N/A	BMI (Body Mass Index): <b>(NUMBER)</b>
622	NUMERATOR	PDD- EGD IN PAST 12 MTHS (OR UPPER GI STUDY)	HMT.102.1	#N/A	Have you had an endoscopy (EGD) in the past 12 months?: <b>Yes</b>
622	DENOMINATOR	PDD- GERD	HMT.12.1	#N/A	Gastroesophageal reflux disease (GERD), heartburn: <b>Yes</b>
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9000	#N/A	INJECTION DOXORUBICIN HCL 10 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9001	#N/A	INJ DOXORUBICIN HCL ALL LIPID FORMULATIONS 10 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9010	#N/A	INJECTION ALEMTUZUMAB 10 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9015	#N/A	INJECTION ALDESLEUKIN PER SINGLE USE VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9017	#N/A	INJECTION ARSENIC TRIOXIDE 1 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9020	#N/A	INJECTION ASPARAGINASE 10,000 UNITS
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9025	#N/A	INJECTION AZACITIDINE 1 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9027	#N/A	INJECTION CLOFARABINE 1 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9031	#N/A	BCG PER INSTILLATION
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9033	#N/A	INJECTION BENDAMUSTINE HCL 1 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9035	#N/A	INJECTION BEVACIZUMAB 10 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9040	#N/A	INJECTION BLEOMYCIN SULFATE 15 UNITS
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9041	#N/A	INJECTION BORTEZOMIB 0.2 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9045	#N/A	INJECTION CARBOPLATIN 50 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9050	#N/A	INJECTION CARMUSTINE 100 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9055	#N/A	INJECTION CETUXIMAB 100 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9060	#N/A	INJECTION CISPLATIN POWDER OR SOLUTION 10 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9065	#N/A	INJECTION CLADRIBINE PER 1 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9070	#N/A	CYCLOPHOSPHAMIDE 100 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9098	#N/A	INJECTION CYTARABINE LIPOSOME 10 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9100	#N/A	INJECTION CYTARABINE 100 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9120	#N/A	INJECTION DACTINOMYCIN 0.5 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9130	#N/A	DACARBAZINE 100 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9150	#N/A	INJECTION DAUNORUBICIN 10 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9151	#N/A	INJ DAUNORUBICIN CITRATE LIPOSOMAL FORM 10 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9160	#N/A	INJECTION DENILEUKIN DIFTITOX 300 MCG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9165	#N/A	INJECTION DIETHYLSTIBESTROL DIPHOSPHATE 250 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9171	#N/A	INJECTION DOCETAXEL 1 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9175	#N/A	INJECTION ELLIOTT'S B SOLUTION 1 ML
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9178	#N/A	INJECTION EPIRUBICIN HCL 2 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9181	#N/A	INJECTION ETOPOSIDE 10 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9185	#N/A	INJECTION FLUDARABINE PHOSPHATE 50 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9190	#N/A	INJECTION FLUOROURACIL 500 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9200	#N/A	INJECTION FLOXURIDINE 500 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9201	#N/A	INJECTION GEMCITABINE HCL 200 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9202	#N/A	GOSERELIN ACETATE IMPLANT PER 3.6 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9206	#N/A	INJECTION IRINOTECAN 20 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9207	#N/A	INJECTION IXABEPILONE 1 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9208	#N/A	INJECTION IFOSFAMIDE 1 G
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9209	#N/A	INJECTION MESNA 200 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9211	#N/A	INJECTION IDARUBICIN HCL 5 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9212	#N/A	INJECTION INTERFERON ALFACON-1 RECOMBINANT 1 MCG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9213	#N/A	INJECTION INTERFERON ALFA-2A RECOMBINANT 3 M U
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9214	#N/A	INJECTION INTERFERON ALFA-2B RECOMBINANT 1 M U
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9215	#N/A	INJECTION INTERFERON ALFA-N3 250,000 IU
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9216	#N/A	INJECTION INTERFERON GAMMA-1B 3 MILLION UNITS
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9217	#N/A	LEUPROLIDE ACETATE 7.5 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9218	#N/A	LEUPROLIDE ACETATE PER 1 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9219	#N/A	LEUPROLIDE ACETATE IMPLANT 65 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9225	#N/A	HISTRELIN IMPLANT VANTAS 50 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9226	#N/A	HISTRELIN IMPLANT SUPPRELIN LA 50 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9230	#N/A	INJECTION MECHLORETHAMINE HCL 10 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9245	#N/A	INJECTION MELNINJECTION MELPHALAN HCL 50 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9250	#N/A	METHOTREXATE SODIUM 5 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9260	#N/A	METHOTREXATE SODIUM 50 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9261	#N/A	INJECTION NELARABINE 50 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9263	#N/A	INJECTION OXALIPLATIN 0.5 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9264	#N/A	INJECTION PACLITAXEL PROTEINBOUND PARTICLES 1 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9265	#N/A	INJECTION PACLITAXEL 30 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9266	#N/A	INJECTION PEGASPARGASE PER SINGLE DOSE VIAL
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9268	#N/A	INJECTION PENTOSTATIN 10 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9270	#N/A	INJECTION PLICAMYCIN 2.5 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9280	#N/A	MITOMYCIN 5 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9293	#N/A	INJECTION MITOXANTRONE HCL PER 5 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9300	#N/A	INJECTION GEMTUZUMAB OZOGAMICIN 5 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9303	#N/A	INJECTION PANITUMUMAB 10 MG

622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9305	#N/A	INJECTION PEMETREXED 10 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9310	#N/A	INJECTION RITUXIMAB 100 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9320	#N/A	INJECTION STREPTOZOCIN 1 G
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9328	#N/A	INJECTION TEMOZOLOMIDE 1 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9330	#N/A	INJECTION TEMSIROLIMUS 1 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9340	#N/A	INJECTION THIOTEPA 15 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9355	#N/A	INJECTION TRASTUZUMAB 10 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9357	#N/A	INJECTION VALRUBICIN INTRAVESICAL 200 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9360	#N/A	INJECTION VINBLASTINE SULFATE 1 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9370	#N/A	VINCISTINE SULFATE 1 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9390	#N/A	INJECTION VINORELBINE TARTRATE 10 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9395	#N/A	INJECTION FULVESTRANT 25 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9600	#N/A	INJECTION PORFIMER SODIUM 75 MG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	J9999	#N/A	NOT OTHERWISE CLASSIFIED ANTINEOPLASTIC DRUG
622	NUMERATOR	PDD- EGD IN PAST 12 MTHS (OR UPPER GI STUDY)	PHR.100291001.1	#N/A	Have you ever had a test that looks into your esophagus and stomach with a scope (an EGD)? <b>Yes, in the last year</b>
622	NUMERATOR	PDD- EGD IN PAST 12 MTHS (OR UPPER GI STUDY)	PHR.102.1	#N/A	Have you had an endoscopy (EGD) in the past 12 months?: <b>Yes</b>
622	DENOMINATOR EXCLUSION	PDD- GASTRIC BYPASS SURGERY	PHR.104590001.2	#N/A	Does one or both of these apply to you?: <b>Weight loss surgery (Bariatric) in the past 2 years</b>
622	DENOMINATOR	PDD- GERD	PHR.20000005.16	#N/A	Which of the following health conditions have you ever had?: <b>Acid reflux (GERD)</b>
622	DENOMINATOR	PDD- OBESITY	PHR.20000005.25	#N/A	Which of the following health conditions have you ever had?: <b>Obesity (Body Mass Index of 30 or more)</b>
622	DENOMINATOR	PDD- GERD WARNING SYMPTOMS	PHR.210000025.3	#N/A	Have you had any of these warning signs for GERD (acid reflux) in the past 3 months?: <b>Swallowing that is difficult/painful or a choking sensation</b>
622	DENOMINATOR	PDD- GERD WARNING SYMPTOMS	PHR.210000025.4	#N/A	Have you had any of these warning signs for GERD (acid reflux) in the past 3 months?: <b>Unexplained weight loss (more than 5%)</b>
622	NUMERATOR	PDD- EGD IN PAST 12 MTHS (OR UPPER GI STUDY)	PHR.631.1	#N/A	Have you had a test in the last 12 mos where the doctor looks into your esophagus and stomach with a scope (EGD)?: <b>Yes</b>
622	DENOMINATOR	PDD- GERD	PHR.896.1	#N/A	Has your health care provider told you have gastroesophageal reflux disease (GERD)?: <b>Yes</b>
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	Q0083	#N/A	CHEMO ADMIN OTH THAN INFUS TECH ONLY PER VISIT
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	Q0084	#N/A	CHEMOTHERAPY ADMIN INFUS TECHNIQUE ONLY VISIT
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	Q0085	#N/A	CHEMOTHAPY ADMIN BOTH INFUS TECH&OTH TECHIQUE-VST
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	Q0163	#N/A	DIPHENHYDRAMINE HCL 50 MG ORAL NOT>48 HR DOSE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	Q0164	#N/A	PROCHLORPERAZINE MALEATE 5 MG ORL NOT>48 HR DOSE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	Q0165	#N/A	PROCHLORPERAZINE MALEATE 10 MG ORL NOT>48HR DOSE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	Q0166	#N/A	GRANISETRON HCL 1 MG ORL NOT >48 HR DOSE REGIMEN
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	Q0167	#N/A	DRONABINOL 2.5 MG ORAL NOT >48 HR DOSE REGIMEN
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	Q0168	#N/A	DRONABINOL 5 MG ORAL NOT>48 HR DOSE REGIMEN
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	Q0169	#N/A	PROMETHAZINE HCL 12.5 MG ORAL NOT>48 HR DOSE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	Q0170	#N/A	PROMETHAZINE HCL 25 MG ORAL NOT >48 HR DOSE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	Q0171	#N/A	CHLORPROMAZINE HCL 10 MG ORAL NOT >48 HR DOSE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	Q0172	#N/A	CHLORPROMAZINE HCL 25 MG ORAL NOT >48 HR DOSE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	Q0173	#N/A	TRIMETHOBENZAMIDE HCL 250 MG ORL NOT>48 HR DOSE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	Q0174	#N/A	THIETHYLPERAZINE MALEATE 10 MG ORL NOT>48HR DOSE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	Q0175	#N/A	PERPHENZINE 4 MG ORAL NOT >48 HR DOSE REGIMEN
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	Q0176	#N/A	PERPHENZINE BMG ORAL NOT >48 HR DOSE REGIMEN
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	Q0177	#N/A	HYDROXYZINE PAMOATE 25 MG ORAL NOT >48 HR DOSE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	Q0178	#N/A	HYDROXYZINE PAMOATE 50 MG ORAL NOT >48 HR DOSE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	Q0180	#N/A	DOLASTRON MESYLATE 100 MG ORL NOT >48 HR DOSE
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	Q0181	#N/A	UNS ORAL DOSAGE ANTI-EMETIC NOT >48 HR DOSE REG
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	Q2048	#N/A	<i>Injection, doxorubicin hydrochloride, liposomal, DOXIL, 10 mg</i>
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	Q2049	#N/A	<i>Injection, doxorubicin hydrochloride, liposomal, imported Lipodox, 10 mg</i>
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	Q3001	#N/A	ADJUNCTIVE PROCEDURE
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	Q5001	#N/A	HOSPICE CARE PROVIDED IN PATIENTS HOME/RESIDENCE
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	Q5002	#N/A	HOSPICE CARE PROVIDED ASSISTED LIVING FACILITY
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	Q5003	#N/A	HOSPICE CARE PROV NURSING LTC FACIL/NON-SKILL NF
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	Q5004	#N/A	HOSPICE CARE PROVIDED SKILLED NURSING FACILITY
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	Q5005	#N/A	HOSPICE CARE PROVIDED IN INPATIENT HOSPITAL
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	Q5006	#N/A	HOSPICE CARE PROV INPATIENT HOSPICE FACILITY
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	Q5007	#N/A	HOSPICE CARE PROV LONG TERM CARE FACILITY
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	Q5008	#N/A	HOSPICE CARE PROV INPATIENT PSYCHIATRIC FACILITY
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	Q5009	#N/A	HOSPICE CARE PROVIDED IN PLACE NOS
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	S0255	#N/A	BY NURSE SOCIAL WORKER OR OTHER DESIGNATED STAFF
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	S0271	#N/A	PHYS MGT PT HOME CARE HOSPICE MONTHLY CASE RATE
622	DENOMINATOR EXCLUSION	GASTRIC RESTRICTIVE PROCEDURE	S2082	#N/A	LAP SURG; ADJ GASTRIC BAND INCL PLCMT SUBQ PORT
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	S9126	#N/A	HOSPICE CARE IN THE HOME PER DIEM
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	S9329	#N/A	HOME INFUSION TX CHEMOTHERAPY INFUSION; PER DIEM
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	S9330	#N/A	HIT CONT CHEMOTHAPY INFUS; CARE COORD PER DIEM
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY/RADIATION THERAPY	S9331	#N/A	HIT INTERMIT CHEMOTHAPY INFUS; CARE COORD-DIEM
622	DENOMINATOR GENERAL EXCLUSION	SNF	S9529	#N/A	HOME OR SKILLED NURSING FACILITY PATIENT
622	DENOMINATOR	PDD- BMI	<a href="#">SS.113.1009</a>	#N/A	BMI:
622	DENOMINATOR	PDD- GERD	SS.369.2231	#N/A	Has a health care provider ever told you that you have any of the following health conditions? (Check all that apply): <b>GERD (chronic or frequent heartburn)</b>
622	DENOMINATOR	PDD- OBESITY	SS.43.841	#N/A	Has a health care provider (doctor, nurse, specialist, etc.) ever told you that you have any of the following health conditions? (Check all that apply): <b>Obesity</b>
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	T2042	#N/A	HOSPICE ROUTINE HOME CARE; PER DIEM
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	T2043	#N/A	HOSPICE CONTINUOUS HOME CARE; PER HOUR
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	T2044	#N/A	HOSPICE INPATIENT RESPITE CARE; PER DIEM
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	T2045	#N/A	HOSPICE GENERAL INPATIENT CARE; PER DIEM
622	DENOMINATOR GENERAL EXCLUSION	HOSPICE	T2046	#N/A	HOSPICE LONG TERM CARE RM AND BD ONLY PER DIEM
622	NUMERATOR	CANCER GASTRIC	V10.04	285028	PERSONAL HISTORY MALIGNANT NEOPLASM STOMACH
622	DENOMINATOR EXCLUSION	WEIGHT LOSS SURGERY (ICD9)	V45.86	29884	BIARIATRIC SURGERY STATUS
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	V58.0	2510	RADIOTHERAPY
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	V58.1	#N/A	ENCOUNTER ANTINEOPLASTIC CHEMO&IMMUNOTHERAPY
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY (ICD9)	V58.1	#N/A	ENCOUNTER ANTINEOPLASTIC CHEMO&IMMUNOTHERAPY
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	V58.11	25111	ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY (ICD9)	V58.11	25111	ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	V58.12	25112	ENCOUNTER FOR ANTINEOPLASTIC IMMUNOTHERAPY
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY (ICD9)	V58.12	25112	ENCOUNTER FOR ANTINEOPLASTIC IMMUNOTHERAPY
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	V66.1	25189	CONVALESCENCE FOLLOWING RADIOTHERAPY

622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	V66.2	Z5189	CONVALESCENCE FOLLOWING CHEMOTHERAPY
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY (ICD9)	V66.2	Z5189	CONVALESCENCE FOLLOWING CHEMOTHERAPY
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	V66.7	Z515	ENCOUNTER FOR PALLIATIVE CARE
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	V67.1	Z08	RADIOTHERAPY FOLLOW-UP EXAMINATION
622	DENOMINATOR EXCLUSION	METASTATIC MALIGNANCY(INCL CHEMO/RADIATION)	V67.2	Z08	CHEMOTHERAPY FOLLOW-UP EXAMINATION
622	DENOMINATOR GENERAL EXCLUSION	CHEMOTHERAPY (ICD9)	V67.2	Z08	CHEMOTHERAPY FOLLOW-UP EXAMINATION
622	DENOMINATOR	BMI>=30	V85.3	#N/A	Body Mass Index between 30-39, adult
622	DENOMINATOR	BMI>=30	V85.30	#N/A	Body Mass Index 30.0-30.9, adult
622	DENOMINATOR	BMI>=30	V85.31	#N/A	Body Mass Index 31.0-31.9, adult
622	DENOMINATOR	BMI>=30	V85.32	#N/A	Body Mass Index 32.0-32.9, adult
622	DENOMINATOR	BMI>=30	V85.33	#N/A	Body Mass Index 33.0-33.9, adult
622	DENOMINATOR	BMI>=30	V85.34	#N/A	Body Mass Index 34.0-34.9, adult
622	DENOMINATOR	BMI>=30	V85.35	#N/A	Body Mass Index 35.0-35.9, adult
622	DENOMINATOR	BMI>=30	V85.36	#N/A	Body Mass Index 36.0-36.9, adult
622	DENOMINATOR	BMI>=30	V85.37	#N/A	Body Mass Index 37.0-37.9, adult
622	DENOMINATOR	BMI>=30	V85.38	#N/A	Body Mass Index 38.0-38.9, adult
622	DENOMINATOR	BMI>=30	V85.39	#N/A	Body Mass Index 39.0-39.9, adult
622	DENOMINATOR	BMI>=30	V85.4	#N/A	Body Mass Index 40 and over, adult