

Revenue Code	Revenue Code Description	Cost Center Code CMS	Cost Center Description	Comment	Non-Allowed Per Wisconsin ForwardHealth Policy
0001	Tatal Change	2552-10 999	Encluded		
0001 0002	Total Charge RESERVED	999	Excluded Excluded		
	RESERVED	999	Excluded		
	RESERVED	999	Excluded		
	RESERVED	999 999	Excluded		
	HIPPS - SNF PPS IRF PPS	999	Excluded		
	RESERVED	999	Excluded		
0026	RESERVED	999	Excluded		
	RESERVED	999	Excluded		
	RESERVED	999 999	Excluded		
	RESERVED RESERVED	999	Excluded		
	RESERVED	999	Excluded		
	RESERVED	999	Excluded		
	RESERVED	999	Excluded		
	RESERVED	999	Excluded		
	RESERVED RESERVED	999 999	Excluded		
	RESERVED	999	Excluded	<u> </u>	
	RESERVED	999	Excluded		
	RESERVED	999	Excluded		
	RESERVED	999	Excluded		
	Room & Board (Private) Medical/Surgical/Gyn	999 999	Excluded Excluded	l	
	OB	999	Excluded		
	Pediatric	999	Excluded		
	Psychiatric	999	Excluded		
	Hospice	999	Excluded		
	Detoxification Oncology	999 999	Excluded Excluded		
	Rehab	999	Excluded		
0119	Other	999	Excluded		
0120	Room & Board (Semi-Private 2 beds)	999	Excluded		
0121	Medical/Surgical/Gyn	999	Excluded		
0122 0123	OB	999 999	Excluded		
	Pediatric Psychiatric	999	Excluded		
	Hospice	999	Excluded		
	Detoxification	999	Excluded		
0127	Oncology	999	Excluded		
	Rehab	999	Excluded		
0129 0130	Other Room&Board (Semi private 3-4 beds)	999 999	Excluded		
	Medical/Surgical/Gyn	999	Excluded		
0132	OB	999	Excluded		
	Pediatric	999	Excluded		
	Psychiatric	999	Excluded		
	Hospice Rehab	999 999	Excluded		
	Room & Board (Private Deluxe)	999	Excluded		Noncovered revenue codes
	Medical/Surgical/Gyn	999	Excluded		Noncovered revenue codes
	OB	999	Excluded		Noncovered revenue codes
	Pediatric	999	Excluded		Noncovered revenue codes
	Psychiatric Hospice	999 999	Excluded Excluded		Noncovered revenue codes Noncovered revenue codes
	Detoxification	999	Excluded	<u> </u>	Noncovered revenue codes
0147	Oncology	999	Excluded		Noncovered revenue codes
	Rehab	999	Excluded		Noncovered revenue codes
	Other	999	Excluded		Noncovered revenue codes
	Room & Board (Ward) Room & Board (Ward)	999 999	Excluded Excluded		
	OB	999	Excluded		
	Psychiatric	999	Excluded		
	Hospice	999	Excluded		
	Oncology	999	Excluded		
	Room & Board (other)	999	Excluded		
0164 0169	Sterile Environment Room & Board (other)	999 999	Excluded Excluded		
	Nursery	999	Excluded	1	
0171	Newborn-Level I	999	Excluded		
0172	Newborn-Level II	999	Excluded		
0173	Newborn-Level III	999	Excluded		
0174	Newborn-Level IV	999	Excluded	ļ	<u> </u>



0179         Other Narsery.         999         Excluded           0180         Leave of Absence         999         Excluded           0181         RESERVED         999         Excluded           0182         Patient Convenince         999         Excluded           0183         Therapeutic Leave         999         Excluded           0184         RESERVED         999         Excluded           0185         Hospitalization         999         Excluded           0186         RESERVED         999         Excluded           0187         RESERVED         999         Excluded           0188         RESERVED         999         Excluded           0188         RESERVED         999         Excluded           0190         Subsortic Care Level I         999         Excluded           0191         Subsortic Care Level II         999         Excluded           0201         Internstve care         999         Excluded           0202         Medical         999         Excluded           0203         Ipelainic         999         Excluded           0204         hypelainitic         999         Excluded           0202<	n Comment	Non-Allowed Per Wisconsin ForwardHealth Policy
0181         RESERVED         999         Excluded           0182         Patient Convenience         999         Excluded           0183         Therapeutic Leave         999         Excluded           0184         RESERVED         999         Excluded           0185         Hospitalization         999         Excluded           0186         RESERVED         999         Excluded           0187         RESERVED         999         Excluded           0188         RESERVED         999         Excluded           0189         Other leave of absence         999         Excluded           0191         Subscute care         999         Excluded           0193         Subscute care Level II         999         Excluded           0201         Surgical         999         Excluded           0201         Surgical         999         Excluded           0202         Petlatric         999         Excluded           0203         Petlatric         999         Excluded           0204         Itermediate (CU         999         Excluded           0206         Intermediate (CU         999         Excluded           0210 <td></td> <td></td>		
0182Patient Convenience999Excluded0183Therapeutic Leave999Excluded0184RESERVED999Excluded0185Hospitalization999Excluded0186RESERVED999Excluded0187RESERVED999Excluded0188RESERVED999Excluded0189Other leave of absence999Excluded0190Subacute care999Excluded0101Subacute Care Level I999Excluded0202Medical999Excluded0203Intermediate ICU999Excluded0204Pedicial999Excluded0205Horisotic are999Excluded0206Intermediate ICU999Excluded0207Medical999Excluded0208Firumian999Excluded0209Other intensive care999Excluded0201Koronary care999Excluded0202Medical999Excluded0203Polatric999Excluded0204Poyocardia Infraction999Excluded0210Coronary care999Excluded0211Myocardia Infraction999Excluded0212Admission charge999Excluded0213Herr Transplant999Excluded0214Intermediate CU999Excluded0212Admission charge999 <t< td=""><td></td><td>Noncovered revenue codes; nonbillable for bill type 013X</td></t<>		Noncovered revenue codes; nonbillable for bill type 013X
0183         Therapeutic Leave         999         Excluded           0184         RESERVED         999         Excluded           0185         Hospitalization         999         Excluded           0186         RESERVED         999         Excluded           0187         RESERVED         999         Excluded           0188         RESERVED         999         Excluded           0189         Other leave of absence         999         Excluded           0180         Subacute Care Level I         999         Excluded           0191         Subacute Care Level I         999         Excluded           0103         Subacute Care Level II         999         Excluded           0201         Surgical         999         Excluded           0202         Medicial         999         Excluded           0203         Intermodiate ICU         999         Excluded           0204         Psychiatric         999         Excluded           0205         Intermodiate ICU         999         Excluded           0206         Other intensive care         999         Excluded           0210         Coronary care         999         Excluded		Noncovered revenue codes; nonbillable for bill type 013X
Ols4         RESERVED         999         Excluded           0185         Hospitalization         999         Excluded           0186         RESERVED         999         Excluded           0187         RESERVED         999         Excluded           0188         RESERVED         999         Excluded           0180         Other leave of absence         999         Excluded           0180         Other leave of absence         999         Excluded           0191         Subacute Care Level I         999         Excluded           0103         Subacute Care Level I         999         Excluded           0201         Internsive care         999         Excluded           0202         Medical         999         Excluded           0203         Pediatric         999         Excluded           0204         Psychiatric         999         Excluded           0205         Intermediate ICU         999         Excluded           0206         Intermediate ICU         999         Excluded           0207         Barr care         999         Excluded           0208         Truman         999         Excluded <td< td=""><td></td><td>Noncovered revenue codes; nonbillable for bill type 013X</td></td<>		Noncovered revenue codes; nonbillable for bill type 013X
0185         Hospitalization         999         Excluded           0186         RESERVED         999         Excluded           0187         RESERVED         999         Excluded           0188         RESERVED         999         Excluded           0189         Other leave of absence         999         Excluded           0189         Other leave of absence         999         Excluded           0191         Subacute care         999         Excluded           0203         Buscute Care Level I         999         Excluded           0201         Surgical         999         Excluded           0202         Medical         999         Excluded           0203         Pediatric         999         Excluded           0204         Psychiatric         999         Excluded           0205         Intermediate ICU         999         Excluded           0206         Intermediate ICU         999         Excluded           0207         Burn care         999         Excluded           0210         Other intensive care         999         Excluded           0210         Coronary care         999         Excluded		Noncovered revenue codes; nonbillable for bill type 013X
Olise         RESERVED         999         Excluded           0187         RESERVED         999         Excluded           0188         RESERVED         999         Excluded           0189         Other leave of absence         999         Excluded           0190         Subacute care         999         Excluded           0191         Subacute Care Level II         999         Excluded           0201         Intensive care         999         Excluded           02021         Surgical         999         Excluded           02021         Burgical         999         Excluded           02022         Medical         999         Excluded           02020         Internsvice care         999         Excluded           02021         Burgical         999         Excluded           02020         Burgical         999         Excluded           02031         Perchided         999         Excluded           0204         Psychiatric         999         Excluded           0205         Bara         eare         999         Excluded           0210         Coronary care         999         Excluded           0211		Noncovered revenue codes; nonbillable for bill type 013X
0187         RESERVED         999         Excluded           0188         RESERVED         999         Excluded           0189         Other leave of absence         999         Excluded           0191         Subacute care         999         Excluded           01913         Subacute Care Level I         999         Excluded           0200         Intensive care         999         Excluded           0201         Surgical         999         Excluded           0202         Medical         999         Excluded           0202         Medical         999         Excluded           0202         Medical         999         Excluded           0203         Pechiatric         999         Excluded           0204         Psychiatric         999         Excluded           0205         Other intensive care         999         Excluded           0206         Intermediate ICU         999         Excluded           0210         Opeardial Infraction         999         Excluded           0211         Myocardial Infraction         999         Excluded           0212         Pulmonary Care         999         Excluded		Noncovered revenue codes; nonbillable for bill type 013X
0188         RESERVED         999         Excluded           0189         Other leave of absence         999         Excluded           0190         Subacute care         999         Excluded           0191         Subacute Care Level II         999         Excluded           0200         Intensive care         999         Excluded           0201         Surgical         999         Excluded           0202         Medical         999         Excluded           0203         Pediatric         999         Excluded           0204         Psychiatric         999         Excluded           0205         Intermediate ICU         999         Excluded           0206         Intermediate ICU         999         Excluded           0208         Trauma         999         Excluded           0210         Coronary care         999         Excluded           0211         Mynearcian         999         Excluded           0212         Pulmonary Care         999         Excluded           0213         Heart Transplant         999         Excluded           0214         Intermediate CCU         999         Excluded		Noncovered revenue codes; nonbillable for bill type 013X
0189Other leave of absence999Excluded0190Subacute care999Excluded0191Subacute Care Level II999Excluded0200Intensive care999Excluded0201Surgical999Excluded0202Medical999Excluded0203Pediatric999Excluded0204Psychiatric999Excluded0205Medical999Excluded0206Intermediate ICU999Excluded0207Burn care999Excluded0208Trauma999Excluded0209Other intensive care999Excluded0210Coronary care999Excluded0211Mycardial Infarction999Excluded0212Pulmonary Care999Excluded0213Heart Transplant999Excluded0214Intermediate CCU999Excluded0215Other Coronary Care999Excluded0220Special charges76Other Ancillary Services0221Admission charge999Excluded0222Other apecial charges999Excluded0233ICU999Excluded0233ICU999Excluded0233ICU999Excluded0234Incremental nursing charge rate999Excluded0233ICU999Excluded0234Other999 <td< td=""><td></td><td>Noncovered revenue codes; nonbillable for bill type 013X</td></td<>		Noncovered revenue codes; nonbillable for bill type 013X
0190Subacute Care999Excluded0191Subacute Care Level II999Excluded0200Intensive care999Excluded0201Surgical999Excluded0202Medical999Excluded0203Pediatric999Excluded0204Psychatric999Excluded0205Medical999Excluded0206Intermediate ICU999Excluded0207Burn care999Excluded0208Thruma999Excluded0209Other intensive care999Excluded0210Coronary care999Excluded0211Myocardial Infarction999Excluded0212Pulmonary Care999Excluded0213Heart Transplant999Excluded0214Intermediate CCU999Excluded0220Special charges76Other Ancillary Services0221Admission charge999Excluded0222Special charges999Excluded0223U.R. service charge999Excluded0224CCU999Excluded0233Icremental nursing charge rate999Excluded0234CCU999Excluded0235Hospice999Excluded0236Incremental nursing charge rate999Excluded0231Heatrices Ancillary999Excluded0232Oth		Noncovered revenue codes; nonbillable for bill type 013X
0191         Subacute Care Level II         999         Excluded           0193         Subacute Care Level III         999         Excluded           0200         Intensive care         999         Excluded           0201         Surgical         999         Excluded           0202         Medical         999         Excluded           0203         Pediatric         999         Excluded           0204         Psychiatric         999         Excluded           0206         Intermediate ICU         999         Excluded           0207         Burn care         999         Excluded           0208         Trauma         999         Excluded           0209         Other intensive care         999         Excluded           0210         Coronary care         999         Excluded           0211         Myocardial Infarction         999         Excluded           0211         Myocardial Infarction         999         Excluded           0211         Myocardial Infarction         999         Excluded           0211         Other Coronary Care         999         Excluded           0220         Special charges         76         Other Ancill		Noncovered revenue codes; nonbillable for bill type 013X
0193     Subacute Care Level III     999     Excluded       0200     Intensive care     999     Excluded       0201     Surgical     999     Excluded       0202     Medical     999     Excluded       0203     Pediatric     999     Excluded       0204     Psychiatric     999     Excluded       0205     Intermediate ICU     999     Excluded       0206     Intermediate ICU     999     Excluded       0207     Burn care     999     Excluded       0208     Trauma     999     Excluded       0210     Coronary care     999     Excluded       0211     Myocardial Infarction     999     Excluded       0212     Pulmonary Care     999     Excluded       0211     Myocardial Infarction     999     Excluded       0212     Pulmonary Care     999     Excluded       0211     Intermediate CCU     999     Excluded       0220     Special charges     76     Other Ancillary Services       0221     Admission charge     999     Excluded       0223     U.R. service charge     999     Excluded       0231     Nursery     999     Excluded       0232     O		Nonbillable for bill type 013X
0200     Intensive care     999     Excluded       0201     Surgical     999     Excluded       0202     Medical     999     Excluded       0203     Pediatric     999     Excluded       0204     Psychiatric     999     Excluded       0206     Intermediate ICU     999     Excluded       0207     Burn care     999     Excluded       0208     Trauma     999     Excluded       0209     Other intensive care     999     Excluded       0210     Coronary care     999     Excluded       0211     Myocardial Infarction     999     Excluded       0212     Pulmonary Care     999     Excluded       0213     Heart Transplant     999     Excluded       0214     Intermediate CCU     999     Excluded       0220     Special charges     76     Other Ancillary Services       0221     Admission charge     999     Excluded       0222     U.R. service charge     999     Excluded       0230     Incremental nursing charge rate     999     Excluded       0232     U.R. service charge     999     Excluded       0233     ICU     999     Excluded       0234		Nonbillable for bill type 013X
0201     Surgical     999     Excluded       0202     Medical     999     Excluded       0203     Pediatric     999     Excluded       0204     Psychiatric     999     Excluded       0206     Intermediate ICU     999     Excluded       0207     Burn care     999     Excluded       0208     Trauma     999     Excluded       0209     Other intensive care     999     Excluded       0211     Myocardial Infarction     999     Excluded       0212     Pulmonary Care     999     Excluded       0211     Myocardial Infarction     999     Excluded       0212     Pulmonary Care     999     Excluded       0214     Intermediate CCU     999     Excluded       0219     Other Coronary care     999     Excluded       0220     Special charges     76     Other Ancillary Services       0221     Admission charge     999     Excluded       0222     Other special charges     999     Excluded       0223     U.R. service charge     999     Excluded       0230     Incremental nursing charge rate     999     Excluded       0231     Houspice     999     Excluded		Nonbillable for bill type 013X
0202Medical999Excluded0203Pediatric999Excluded0204Psychiatric999Excluded0206Intermediate ICU999Excluded0207Burn care999Excluded0208Trauma999Excluded0209Other intensive care999Excluded0210Coronary care999Excluded0211Myocardial Infarction999Excluded0212Pulmonary Care999Excluded0213Heart Transplant999Excluded0214Hutmodate CCU999Excluded0215Other Coronary Care999Excluded0220Special charges76Other Ancillary Services0221Admission charge999Excluded0223U.R. service charge999Excluded0230Incremental nursing charge rate999Excluded0231Nursery999Excluded0232OB999Excluded0233ICU999Excluded0234CCU999Excluded0235Hospice999Excluded0244RESERVED999Excluded0250Pharmacy73Drugs Charged to Patients0251Pharmacy: Generic73Drugs Charged to Patients		Nonbillable for bill type 013X Nonbillable for bill type 013X
0203     Pediatric     999     Excluded       0204     Psychiatric     999     Excluded       0206     Intermediate ICU     999     Excluded       0207     Burn care     999     Excluded       0208     Trauma     999     Excluded       0209     Other intensive care     999     Excluded       0210     Coronary care     999     Excluded       0211     Myccardial Infarction     999     Excluded       0213     Heart Transplant     999     Excluded       0214     Intermediate CCU     999     Excluded       0215     Other Coronary Care     999     Excluded       0221     Other Coronary Care     999     Excluded       0221     Admission charge     999     Excluded       0222     Special charges     76     Other Ancillary Services       0223     U.R. service charge     999     Excluded       0224     Admission charge     999     Excluded       0225     Other special charges     999     Excluded       0231     Incremental nursing charge rate     999     Excluded       0232     Other     999     Excluded       0233     ICU     999     Excluded		Nonbillable for bill type 013X
0206Intermediate ICU999Excluded0207Burn care999Excluded0208Trauma999Excluded0209Other intensive care999Excluded0210Coronary care999Excluded0211Myocardial Infarction999Excluded0212Pulmonary Care999Excluded0213Heart Transplant999Excluded0214Intermediate CCU999Excluded0210Other Coronary Care999Excluded0211Other Coronary Care999Excluded0220Special charges76Other Ancillary Services0221Admission charge999Excluded0223U.R. service charge999Excluded0224Other special charges999Excluded0230Incremental nursing charge rate999Excluded0231Nursery999Excluded0233ICU999Excluded0233ICU999Excluded0234CCU999Excluded0235Other999Excluded0240All-inclusive Ancillary999Excluded0241Basic1196Aggregate Ancillary0250Pharmacy73Drugs Charged to Patients0251Pharmacy: Generic73Drugs Charged to Patients		Nonbillable for bill type 013X
0207Burn care999Excluded0208Trauma999Excluded0209Other intensive care999Excluded0210Coronary care999Excluded0211Myocardial Infarction999Excluded0212Pulmonary Care999Excluded0213Heart Transplant999Excluded0214Intermediate CCU999Excluded0215Other Coronary Care999Excluded0220Special charges76Other Ancillary Services0221Admission charge999Excluded0223U.R. service charge999Excluded0230Incremental nursing charge rate999Excluded0231Nursery999Excluded0233ICU999Excluded0234CCU999Excluded0235Hospice999Excluded0234CCU999Excluded0235Other999Excluded0240All-inclusive Ancillary999Excluded0241Basic196Aggregate Ancillary0242All-inclusive ancillary999Excluded0250Pharmacy73Drugs Charged to Patients0251Pharmacy: Generic73Drugs Charged to Patients		Nonbillable for bill type 013X
0208Trauma999Excluded0209Other intensive care999Excluded0210Coronary care999Excluded0211Myocardial Infarction999Excluded0212Pulmonary Care999Excluded0213Heart Transplant999Excluded0214Intermediate CCU999Excluded0215Other Coronary Care999Excluded0220Special charges76Other Ancillary Services0221Admission charge999Excluded0223U.R. service charge999Excluded0230Incremental nursing charge rate999Excluded0231Incremental nursing charge rate999Excluded0232OB999Excluded0233ICU999Excluded0234CCU999Excluded0235Hospice999Excluded0236Nursery999Excluded0237Other999Excluded0241All-inclusive Ancillary999Excluded0250Pharmacy73Drugs Charged to Patients0251Pharmacy: Generic73Drugs Charged to Patients		Nonbillable for bill type 013X
0209Other intensive care999Excluded0210Coronary care999Excluded0211Myocardial Infarction999Excluded0212Pulmonary Care999Excluded0213Heart Transplant999Excluded0214Intermediate CCU999Excluded0220Special charges76Other Ancillary Services0221Admission charge999Excluded0223U.R. service charge999Excluded0224Other special charges999Excluded0230Incremental nursing charge rate999Excluded0231Nursery999Excluded0232OB999Excluded0233ICU999Excluded0234CCU999Excluded0235Hospice999Excluded0234CCU999Excluded0235Hospice999Excluded0242All-inclusive Ancillary999Excluded0241Basic196Aggregate Ancillary0242Other ancillary999Excluded0243Other ancillary999Excluded0244RESERVED999Excluded02450Pharmacy73Drugs Charged to Patients0251Pharmacy: Generic73Drugs Charged to Patients		Nonbillable for bill type 013X
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0212Pulmonary Care999Excluded0213Heart Transplant999Excluded0214Intermediate CCU999Excluded0219Other Coronary Care999Excluded0220Special charges76Other Ancillary Services0221Admission charge999Excluded0223U.R. service charge999Excluded0224Other special charges999Excluded0225Other special charges999Excluded0226Other special charges999Excluded0227Other special charges999Excluded0231Nursery999Excluded0232OB999Excluded0233ICU999Excluded0234CCU999Excluded0239Other999Excluded0240All-inclusive Ancillary999Excluded0241Basic196Aggregate Ancillary0242All-inclusive Ancillary999Excluded0244RESERVED999Excluded0250Pharmacy73Drugs Charged to Patients0251Pharmacy: Generic73Drugs Charged to Patients		Nonbillable for bill type 013X
0213     Heart Transplant     999     Excluded       0214     Intermediate CCU     999     Excluded       0219     Other Coronary Care     999     Excluded       0220     Special charges     76     Other Ancillary Services       0221     Admission charge     999     Excluded       0223     U.R. service charge     999     Excluded       0224     Other special charges     999     Excluded       0230     Incremental nursing charge rate     999     Excluded       0232     OB     999     Excluded       0233     ICU     999     Excluded       0234     CCU     999     Excluded       0240     All-inclusive Ancillary     999     Excluded       0241     Basic     196     Aggregate Ancillary       0242     All-inclusive ancillary     999     Excluded       0244     RESERVED     999     Excluded       0240     All-inclusive ancillary     999     Excluded       0241     Basic     196     Aggregate Ancillary       0250     Pharmacy     73     Drugs Charged to Patients       0250     Pharmacy: Generic     73     Drugs Charged to Patients		Nonbillable for bill type 013X
0214Intermediate CU999Excluded0219Other Coronary Care999Excluded0220Special charges76Other Ancillary Services0221Admission charge999Excluded0223U.R. service charge999Excluded0229Other special charges999Excluded0230Incremental nursing charge rate999Excluded0231Nursery999Excluded0232OB999Excluded0233ICU999Excluded0234CCU999Excluded0235Hospice999Excluded0240All-inclusive Ancillary999Excluded0241Basic196Aggregate Ancillary0242All-inclusive ancillary999Excluded0250Pharmacy73Drugs Charged to Patients0251Pharmacy: Generic73Drugs Charged to Patients		Nonbillable for bill type 013X
0219Other Coronary Care999Excluded0220Special charges76Other Ancillary Services0221Admission charge999Excluded0223U.R. service charge999Excluded0229Other special charges999Excluded0230Incremental nursing charge rate999Excluded0231Nursery999Excluded0232OB999Excluded0233ICU999Excluded0234CCU999Excluded0235Hospice999Excluded0240All-inclusive Ancillary999Excluded0241Basic196Aggregate Ancillary0242All-inclusive ancillary999Excluded0244RESERVED999Excluded0250Pharmacy73Drugs Charged to Patients0251Pharmacy: Generic73Drugs Charged to Patients		Nonbillable for bill type 013X
0220     Special charges     76     Other Ancillary Services       0221     Admission charge     999     Excluded       0223     U.R. service charge     999     Excluded       0229     Other special charges     999     Excluded       0230     Incremental nursing charge rate     999     Excluded       0231     Nursery     999     Excluded       0232     OB     999     Excluded       0233     ICU     999     Excluded       0234     CCU     999     Excluded       0239     Other     999     Excluded       0234     Despice     999     Excluded       0235     Hospice     999     Excluded       0240     All-inclusive Ancillary     999     Excluded       0241     Basic     196     Aggregate Ancillary       0242     RESERVED     999     Excluded       0244     RESERVED     999     Excluded       0250     Pharmacy     73     Drugs Charged to Patients       0251     Pharmacy: Generic     73     Drugs Charged to Patients		Nonbillable for bill type 013X Nonbillable for bill type 013X
0223     U.R. service charge     999     Excluded       0229     Other special charges     999     Excluded       0230     Incremental nursing charge rate     999     Excluded       0231     Nursery     999     Excluded       0232     OB     999     Excluded       0233     ICU     999     Excluded       0234     CCU     999     Excluded       0235     Hospice     999     Excluded       0234     OCU     999     Excluded       0235     Hospice     999     Excluded       0234     OCU     999     Excluded       0235     Hospice     999     Excluded       0240     All-inclusive Ancillary     999     Excluded       0241     Basic     196     Aggregate Ancillary       0242     All-inclusive Ancillary     999     Excluded       0244     RESERVED     999     Excluded       0249     Other all inclusive ancillary     999     Excluded       0250     Pharmacy     73     Drugs Charged to Patients       0251     Pharmacy: Generic     73     Drugs Charged to Patients	Limited to HCPCS code T1013 for intepreter services	
0229Other special charges999Excluded0230Incremental nursing charge rate999Excluded0231Nursery999Excluded0232OB999Excluded0233ICU999Excluded0234CCU999Excluded0235Hospice999Excluded0236Other999Excluded0240All-inclusive Ancillary999Excluded0241Basic196Aggregate Ancillary0242All-inclusive Ancillary999Excluded0244RESERVED999Excluded0249Other all inclusive ancillary999Excluded0250Pharmacy73Drugs Charged to Patients0251Pharmacy: Generic73Drugs Charged to Patients		Noncovered revenue codes; nonbillable for bill type 013X
0229Other special charges999Excluded0230Incremental nursing charge rate999Excluded0231Nursery999Excluded0232OB999Excluded0233ICU999Excluded0234CCU999Excluded0235Hospice999Excluded0236Other999Excluded0240All-inclusive Ancillary999Excluded0241Basic196Aggregate Ancillary0242All-inclusive Ancillary999Excluded0244RESERVED999Excluded0249Other all inclusive ancillary999Excluded0250Pharmacy73Drugs Charged to Patients0251Pharmacy: Generic73Drugs Charged to Patients		Nonbillable for bill type 013X
0231     Nursery     999     Excluded       0232     OB     999     Excluded       0233     ICU     999     Excluded       0234     CCU     999     Excluded       0235     Hospice     999     Excluded       0239     Other     999     Excluded       0240     All-inclusive Ancillary     999     Excluded       0241     Basic     196     Aggregate Ancillary       0242     All-inclusive ancillary     999     Excluded       0244     RESERVED     999     Excluded       0249     Other all inclusive ancillary     999     Excluded       0250     Pharmacy     73     Drugs Charged to Patients       0251     Pharmacy: Generic     73     Drugs Charged to Patients		Noncovered revenue codes; nonbillable for bill type 013X
0232     OB     999     Excluded       0233     ICU     999     Excluded       0234     CCU     999     Excluded       0235     Hospice     999     Excluded       0239     Other     999     Excluded       0240     All-inclusive Ancillary     999     Excluded       0241     Basic     196     Aggregate Ancillary       0242     All-inclusive Ancillary     999     Excluded       0244     RESERVED     999     Excluded       0249     Other all inclusive ancillary     999     Excluded       0250     Pharmacy     73     Drugs Charged to Patients       0251     Pharmacy: Generic     73     Drugs Charged to Patients		Nonbillable for bill type 013X
0233     ICU     999     Excluded       0234     CCU     999     Excluded       0235     Hospice     999     Excluded       0239     Other     999     Excluded       0240     All-inclusive Ancillary     999     Excluded       0241     Basic     196     Aggregate Ancillary       0242     All-inclusive Ancillary     999     Excluded       0244     RESERVED     999     Excluded       0249     Other all inclusive ancillary     999     Excluded       0249     Other all inclusive ancillary     999     Excluded       0250     Pharmacy     73     Drugs Charged to Patients       0251     Pharmacy: Generic     73     Drugs Charged to Patients		Nonbillable for bill type 013X
0234     CCU     999     Excluded       0235     Hospice     999     Excluded       0239     Other     999     Excluded       0240     All-inclusive Ancillary     999     Excluded       0241     Basic     196     Aggregate Ancillary       0242     All-inclusive Ancillary     999     Excluded       0242     All-inclusive ancillary     999     Excluded       0244     RESERVED     999     Excluded       0249     Other all inclusive ancillary     999     Excluded       0250     Pharmacy     73     Drugs Charged to Patients       0251     Pharmacy: Generic     73     Drugs Charged to Patients		Nonbillable for bill type 013X
0235     Hospice     999     Excluded       0239     Other     999     Excluded       0240     All-inclusive Ancillary     999     Excluded       0241     Basic     196     Aggregate Ancillary       0242     All-inclusive Ancillary     999     Excluded       0242     All-inclusive ancillary     999     Excluded       0244     RESERVED     999     Excluded       0249     Other all inclusive ancillary     999     Excluded       0250     Pharmacy     73     Drugs Charged to Patients       0251     Pharmacy: Generic     73     Drugs Charged to Patients		Nonbillable for bill type 013X
0239     Other     999     Excluded       0240     All-inclusive Ancillary     999     Excluded       0241     Basic     196     Aggregate Ancillary       0242     All-inclusive Ancillary     999     Excluded       0244     RESERVED     999     Excluded       0249     Other all inclusive ancillary     999     Excluded       0250     Pharmacy     73     Drugs Charged to Patients       0251     Pharmacy: Generic     73     Drugs Charged to Patients		Nonbillable for bill type 013X Nonbillable for bill type 013X
0241     Basic     196     Aggregate Ancillary       0242     All-inclusive Ancillary     999     Excluded       0244     RESERVED     999     Excluded       0249     Other all inclusive ancillary     999     Excluded       0250     Pharmacy     73     Drugs Charged to Patients       0251     Pharmacy: Generic     73     Drugs Charged to Patients		Nonbillable for bill type 013X
0242     All-inclusive Ancillary     999     Excluded       0244     RESERVED     999     Excluded       0249     Other all inclusive ancillary     999     Excluded       0250     Pharmacy     73     Drugs Charged to Patients       0251     Pharmacy: Generic     73     Drugs Charged to Patients		Nonbillable for bill type 013X
0244     RESERVED     999     Excluded       0249     Other all inclusive ancillary     999     Excluded       0250     Pharmacy     73     Drugs Charged to Patients       0251     Pharmacy: Generic     73     Drugs Charged to Patients		ļ
0249     Other all inclusive ancillary     999     Excluded       0250     Pharmacy     73     Drugs Charged to Patients       0251     Pharmacy: Generic     73     Drugs Charged to Patients	<u> </u>	<u> </u>
0250     Pharmacy     73     Drugs Charged to Patients       0251     Pharmacy: Generic     73     Drugs Charged to Patients		Nonbillable for bill type 013X
	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
0252 Pharmacy: Nongeneric 73 Drugs Charged to Patients	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
0253 Take home drugs 73 Drugs Charged to Patients		Nonbillable for bill type 013X
0254 Pharmacy: Incident to other diagnostic services 73 Drugs Charged to Patients		
0255         Pharmacy: Incident to radiology         73         Drugs Charged to Patients           0256         Pharmacy: Experimental drugs         73         Drugs Charged to Patients		



Revenue Code	Revenue Code Description	Cost Center Code CMS 2552-10	Cost Center Description	Comment	Non-Allowed Per Wisconsin ForwardHealth Policy
0257	Pharmacy: Non-prescription	73	Drugs Charged to Patients		
0258	Pharmacy: IV solutions	73	Drugs Charged to Patients	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
0259	Pharmacy: Other	999	Excluded		Nonbillable for bill type 013X
0260	IV Therapy	64	Intravenous Therapy		
0261	IV Therapy: Infusion pump	64	Intravenous Therapy		
0262	IV Therapy: IV Therapy, pharm services	64	Intravenous Therapy		
0263	IV Therapy: IV Therapy/drug/supp/delivery	64	Intravenous Therapy		
0264	IV Therapy: supplies	64	Intravenous Therapy		
0269	IV Therapy: Other IV therapy	64	Intravenous Therapy		
0270	Medical/Surgical Supplies	71	Medical Supplies	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
0271	Medical/Surgical Supplies: Nonsterile supplies	71	Medical Supplies	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
0272	Medical/Surgical Supplies: Sterile supplies	71	Medical Supplies	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
0273	Medical/Surgical Supplies: Take home supplies	71	Medical Supplies		
0274	Medical/Surgical Supplies: Prosthetic/Orthotic devices	71	Medical Supplies		
0275	Medical/Surgical Supplies: Pacemaker	71	Impl. Dev. Charged to Patient		
0276	Medical/Surgical Supplies: Intraocular lens	71	Impl. Dev. Charged to Patient	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
0277	Oxygen-Take home	71	Impl. Dev. Charged to Patient		
0278	Medical/Surgical Supplies: Other implants	71	Impl. Dev. Charged to Patient	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
0279	Medical/Surgical Supplies: Other supplies/devices	999	Excluded		Nonbillable for bill type 013X
0280	Oncology	55	Radiology - Therapeutic		
0290	Durable Medical Equipment	999	Excluded		
0291	DME Rental	999	Excluded		
0292	Durable Medical Equipment: Purchase - new equipment	999	Excluded		
0293	Purchase of used DME	999	Excluded		
0294	Supplies/Drugs for DME effectiveness (HHA only)	999	Excluded		Noncovered revenue codes
0299	Durable Medical Equipment: Other equipment	999	Excluded		Nonbillable for bill type 013X
0300	Laboratory - Clinical Diagnostic	60	Laboratory		
0301	Laboratory - Clinical Diagnostic: Chemistry	60	Laboratory		
0302	Laboratory - Clinical Diagnostic: Immunology	60	Laboratory	_	
0303	Laboratory - Clinical Diagnostic: Renal patient (home)	60	Laboratory		
0304	Laboratory - Clinical Diagnostic: Nonroutine dialysis	60	Laboratory		
0305	Laboratory - Clinical Diagnostic: Hematology	60	Laboratory		
0306	Laboratory - Clinical Diagnostic: Bacteriology/microbiology	60	Laboratory		
0307	Laboratory - Clinical Diagnostic: Urology	60	Laboratory		
0308	RESERVED	999	Excluded		
0309	Laboratory - Clinical Diagnostic: Other laboratory	60	Laboratory		
0310	Laboratory - Pathology	60	Laboratory		
0311	Laboratory - Pathology: Cytology	60	Laboratory		
0312	Laboratory - Pathology: Histology	60	Laboratory		
0314 0319	Laboratory - Pathology: Biopsy Laboratory - Pathology: Other	60 60	Laboratory Laboratory		
0319	Radiology - Diagnostic	54	Radiology - Diagnostic		
0320	Radiology - Diagnostic: Radiology - Diagnostic: Angiocardiography	54	Cardiac Catheterization		
0322	Radiology - Diagnostic: Arthrography Radiology - Diagnostic: Arthrography	54	Radiology - Diagnostic		
0323	Radiology - Diagnostic: Arteriography	54	Radiology - Diagnostic		
0324	Radiology - Diagnostic: Chest X-ray	54	Radiology - Diagnostic		
0329	Radiology - Diagnostic: Other	54	Radiology - Diagnostic		
0330	Radiology - Therapeutic	55	Radiology - Therapeutic		
0331	Radiology - Therapeutic: Chemotherapy - injected	55	Radiology - Therapeutic		
0332	Radiology - Therapeutic: Chemotherapy - oral	55	Radiology - Therapeutic		
0333	Radiology - Therapeutic: Radiation therapy	55	Radiology - Therapeutic		



Revenue Code	Revenue Code Description	Cost Center Code CMS 2552-10	Cost Center Description	Comment	Non-Allowed Per Wisconsin ForwardHealth Policy
	Radiology - Therapeutic: Chemotherapy - IV	55	Radiology - Therapeutic		
	Radiology - Therapeutic: Other	55	Radiology - Therapeutic		
	Nuclear Medicine	55	Radiology - Therapeutic		
	Nuclear Medicine: Diagnostic	54	Radiology - Diagnostic		
	Nuclear Medicine: Therapeutic	55	Radiology - Therapeutic		
	Diagnostic Radiopharms	54 55	Radiology - Diagnostic Radiology - Therapeutic		
	Therapeutic Radiopharms Nuclear Medicine: Other	55			
	CT Scan	54	Radiology - Diagnostic CT Scan		
	CT Scan: Head	54	CT Scan		
	CT Scan: Body	54	CT Scan		
	CT Scan: Other CT scans	54	CT Scan		
	Operating Room Services	50	Operating Room		
	Operating Room Services: Minor surgery	50	Operating Room		
	Operating Room Services: Organ transplant, not kidney	198 999	Aggregate Organ Acquisition Excluded		
	RESERVED				
0367	Operating Room Services: Kidney transplant	999	Excluded		+
0369	Operating Room Services: Other operating room services	50	Operating Room		
	Anesthesia	53	Anesthesiology	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
	Anesthesia: Incident to radiology	53	Anesthesiology		
	Anesthesia: Incident to other diag services	53	Anesthesiology		
	Acupuncture	999	Excluded		Noncovered revenue codes
	Anesthesia: Other anesthesia	53	Anesthesiology		
	Blood	62	Whole Blood & Packed Red Blood Cells		
	Blood: Packed red cells	62	Whole Blood & Packed Red Blood Cells		
	Blood: Whole blood	62	Whole Blood & Packed Red Blood Cells		
	Blood: Plasma	62	Whole Blood & Packed Red Blood Cells		
	Blood: Platelets	62	Whole Blood & Packed Red Blood Cells		
	Blood: Leukocytes	62	Whole Blood & Packed Red Blood Cells		
	Blood: Other components Blood: Other derivatives	62 62	Whole Blood & Packed Red Blood Cells Whole Blood & Packed Red Blood Cells		
		62	Whole Blood & Packed Red Blood Cells Whole Blood & Packed Red Blood Cells		
	Blood: Other blood Blood Storage/Processing	63	Blood Storing, Processing, & Trans		
		63	Blood Storing, Processing, & Trans		
	Blood: Administration (e.g. Transfusion) Other blood handling	63	Blood Storing, Processing, & Trans		
	Other Imaging Services	54	Radiology - Diagnostic		
	Other Imaging Services: Diagnostic mammography	54	Radiology - Diagnostic		
	Other Imaging Services: Ultrasound	55	Radiology - Therapeutic		
	Other Imaging Services: Screening mammography	55	Radiology - Diagnostic		
	Other Imaging Services: PET scan	54	Radiology - Diagnostic		
	Other Imaging Services: Other imaging services	54	Radiology - Diagnostic		
	Respiratory Services	65	Respiratory Therapy		
	Respiratory Services: Inhalation services	65	Respiratory Therapy		
	Respiratory Services: Hyperbaric oxygen therapy	76	Other Ancillary Services		
	Respiratory Services: Other respiratory services	65	Respiratory Therapy		
0420	Physical Therapy	999	Excluded		Noncovered revenue codes
	Physical Therapy: Visit charge	999	Excluded		Noncovered revenue codes
	Physical Therapy: Hourly charge	999	Excluded		Noncovered revenue codes
	Physical Therapy: Group rate	999	Excluded		Noncovered revenue codes
	Physical Therapy: Evaluation/re-evaluation	999	Excluded		Noncovered revenue codes
	Physical Therapy: Other physical therapy	999	Excluded	1	Noncovered revenue codes
	Occupational Therapy	999	Excluded	1	Noncovered revenue codes
	Occupational Therapy: Visit charge	999	Excluded		Noncovered revenue codes
	Occupational Therapy: Hourly charge	999	Excluded		Noncovered revenue codes
	Occupational Therapy: Group rate	999	Excluded		Noncovered revenue codes
	Occupational Therapy: Evaluation/re-evaluation	999	Excluded		Noncovered revenue codes
	Occupational Therapy: Other occupational therapy	999	Excluded Excluded		Noncovered revenue codes
	Speech-Language Pathology	999 999	Excluded		Noncovered revenue codes
	Speech-Language Pathology: Visit charge Speech-Language Pathology: Hourly charge	999	Excluded		Noncovered revenue codes
	Speech-Language Pathology: Hourly charge Speech-Language Pathology: Group rate	999	Excluded		Noncovered revenue codes Noncovered revenue codes
	Speech-Language Pathology: Group rate Speech-Language Pathology: Evaluation/ re-evaluation	999	Excluded		Noncovered revenue codes
	Speech-Language Pathology	999	Excluded		Noncovered revenue codes
	Speech-Language Pathology: Other speech language pathology	999	Excluded		Noncovered revenue codes
0450	Emergency Room	91	Emergency Room	Exempt from member copayment except in certain non-emergency scenarios	



0520         Free-Standing Clinic         90         Clinic         noncovered revenue codes for general houp billing psychiatric of substance abuse service corresponding CPT/ILCPS code on outpattern claims           0521         Runil bealth-clinic         90         Clinic         Exempt from requirement to have a corresponding CPT/ILCPS code on outpattern claims           0523         Family Practice Clinic         90         Clinic         Exempt from requirement to have a corresponding CPT/ILCPS code on outpattern claims           0524         RHCFQHC visit in Part A covered SNF         999         Excluded         corresponding CPT/ILCPS code on outpattern claims           0525         RHCFQHC visit in noncovered SNF, NF, 1CFMR or other         999         Excluded         corresponding CPT/ILCPS code on outpattern claims           0526         Pres-Standing Clinic: Other         90         Clinic         Noncovered revenue codes for general houp billing psychiatric of substance abuse service on outpattern claims           0530         Osteopathic Services: Other osteopathic structures         999         Excluded         noncovered revenue codes for general houp billing psychiatric of substance abuse service           0510         Osteopathic Services: Other osteopathic structures         999         Excluded         noncovered revenue codes for general houp billing psychiatric of substance abuse service           0511         Osteopathic Services: Other osteopathic structures	Revenue Code	Revenue Code Description	Cost Center Code CMS 2552-10	Cost Center Description	Comment	Non-Allowed Per Wisconsin ForwardHealth Policy
6665         imaging hous light au         91         Emergency Room         91           6469         Emergency Room         641         Emergency Room         641           6460         Minnary Fuedin         643         Compared Room         641           6470         Multicary Fuedin         643         Compared Room         641           6471         Multicary Fuedin         76         Older Audilly Service             6471         Multicary Foreign         76         Older Audilly Service             6472         Multicary Color adobby         76         Older Audilly Service             6470         Multicary Color adobby         67         Older Audilly Service             6481         Calidary Stress tes         67         Older Audilly Service             6483         Calidary Stress tes         69         Claic         Europy Audit Service             6494         Calidary Stress tes         69         Claic         Europy Audit Service             6404         Claic Service         69         Claic         Europy Audit Service <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						
0400         Eargency Reson         0         Image provides         0           0400         Restancy Transform         6.6         Restancy Theory            0400         Restancy Transform         6.6         Restancy Theory            0400         Restancy Transform         6.6         Restancy Theory            0410         Restancy Restance         7.6         Restancy Restance            0411         Restancy Restance         7.6         Restancy Restance            0411         Restance         7.6         Restance             0412         Restance         7.6         Restance              0412         Restance         7.6         Restance               0422         Restance         7.6         Restance						
6460         Name         1         1           6460         Release Pactor One         61         Regentry Thony         1           6471         Adabby Pector One         76         Oter Acalley Services         1           6471         Adabby Feature One         76         Oter Acalley Services         1         1           6472         Adabby Feature One         76         Oter Acalley Services         1 <td< td=""><td></td><td>5</td><td></td><td></td><td></td><td></td></td<>		5				
Bolesson Function During         60         Required Types         1           6470         Autology         76         Otter Acading Services         1           6471         Autology Dingstoke         76         Otter Acading Services         1           6471         Autology Clens stoking         76         Otter Acading Services         1         1           6480         Cathology Clens stoking         76         Otter Acading Services         1						
0400         Modelagy         70         Other Ansing Services         1           04171         Modelagy Engenetic         70         Ober Ansilary Services         1           04181         Modelagy Config contradiculary         70         Ober Ansilary Services         1           04181         Confunction Services         1         1         1         1           04181         Confunction Services         1         1         1         1           04181         Confunction Services         1         1         1         1           04181         Confunction Services         0         Dector anticlogy         1						
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6472         Jobbleg: Testiment         76         Otter Analley Services         Image: Control of the Control				*		
B479         Autology: Other analogy         76         Other Audility Services         Image: Calibory of the control of the c						
0400         Cardiology         Description         Intervention           0403         Cardiology Cubics added paid         04         Extension         Intervention           0404         Addution Yango         04         Extension         Intervention           0400         Cardiology Cubics added paid         04         Extension         Intervention           0400         Cardiology Cubics added paid         04         Extension         Intervention           0401         Cardiology Cubics added paid         04         Extension         Intervention           0401         Cardiology Cubics added paid         04         Extension         Intervention         Intervention           0401         Cardiology Cubics added paid         04         Cardiology Cubics added paid         Intervention         Intervention           0401         Cardiology Cubics added paid         Cardiology Cubics added paid         Intervention         Intervention         Intervention <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						
9881         Cardiology Carting carther lab         997         Cardiology Carting carther lab         998           9842         Cardology Stress ted         40         Electre cardiology         40           9843         Cardology Stress ted         40         Electre cardology         40           9846         Cardology Stress ted         40         Electre cardology         40           9840         Cardology Stress ted         40         Electre cardology         40           9840         Cardology Stress ted         40         Escrept from regimment to have a corresponding CFTRICKS code accord accord to						
6482         Cardiology Stress test         69         Factor cardiology         1           6483         Cardiology Tober offsolgy         69         Extor cardiology         6           6483         Cardiology Tober offsolgy         69         Extor cardiology         6           6490         Andiatory Superv         75         ASC (Diried Unit)         Extor cardiology           650         Opticitat services         70         Clinic         comporting CPT/RCVS code in a topication takes           6511         Clinic         Officiat         Revene code for modifaction takes           6512         Clinic						
0483         Cardiolog: Edscandaring         69         Extrem catiology         1           0489         Cardiolog: Obst catiology         67         ASC Diating Units         Extrem from requirement in here a corresponding CF1/RCYS code in corresponding CF1/RCYS code in a corresponding CF1/RCYS code in a corresponding CF1/RCYS code in a corresponding CF1/RCYS code in corresponding CF1/RCYS code in a co						
6480         Cardiology: Other outlodgy         60         Bistric outlodgy         10           0480         Autology: Suggey         75         ASC. (Dimits Unity)         Excreption requirement to have a constraint of have a constrend have a constraint of have a constraint of have a						
B890         Adolatory Suggery         T.S.         ASC (Delined Um)         Except from requirement to have a companion of the bare a comp						
0500         Outputent services         90         Clinic         Except fion regioning CPTIEPSS code on supation to have a property printing CPTIEPSS code           0510         Clinic         Remue code for molication checks         Image: Clinic clini	0490					
0511         Clinic Chronic point center         00         Clinic            0512         Clinic Dovalut clinic         00         Clinic             0513         Clinic DOVAN clinic         00         Clinic             0514         Clinic DOVAN clinic         00         Clinic             0515         Clinic Urgert arc clinic         00         Clinic             0516         Clinic Urgert arc clinic         00         Clinic             0517         Clinic Other clinic         90         Clinic          Nencovered revenue codes for prychiatic is noncovered revenue codes for prychiatic is no reprincipation of a law and compatibility of a law and compa	0500		90	Clinic	corresponding CPT/HCPCS code	
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0513         Chine Peychatric clinic         90         Clinic            0514         Chine, Podutiric clinic         90         Clinic            0515         Chine, Podutiric clinic         90         Clinic            0516         Chine, Podutiric clinic         90         Clinic            0517         Chine, Family Practice         90         Clinic            0518         Chine, Cherr chine         90         Clinic            0510         Chine, Cherr chine         90         Clinic            0520         Free Standing Clinic         90         Clinic          Noncovered revence code for psychiatric for subdance abuse service           0521         Rural health-clinic         909         Excluded         Excerpt from requirement to lave a corresponding CPTHCPCS code on outpacting clinics           0523         Family Practice Clinic         90         Clinic         Excerpt from requirement to lave a corresponding CPTHCPCS code on outpacting clinics           0524         RHC-FQHC visit in pancovered SNF, NF, ICFMR or object         90         Excluded         Excerpt from requirement to lave a corresponding CPTHCPCS code on outpacting clinics           0530         Otoosynthik Services         909         Exclud	0511	Clinic: Chronic pain center		Clinic		
0514     Clinic OBCOT Netlinic     90     Clinic       0515     Clinic Lugard area clinic     90     Clinic       0516     Clinic Lugard area clinic     90     Clinic       0517     Clinic, Family Practice     90     Clinic       0510     Clinic, Coher clinic     90     Clinic       0520     Free Standing Clinic     90     Clinic       0521     Rural health-clinic     90     Clinic       0522     Family Practice Clinic     90     Clinic       0523     Family Practice Clinic     90     Clinic       0524     Rul CrQUC visit in Part A covered SNF     999     Excluded       0525     Family Practice Clinic     90     Clinic       0526     Free Standing Clinic: Other     90     Clinic       0527     Free Standing Clinic: Other     90     Excluded       0528     Free Standing Clinic: Other     90     Clinic       0539     Free Standing Clinic: Other     90     Clinic       0540     Aubdance     999     Excluded     Excerpt from requirement to have a corresponding CPTHCPCS code on outpatient chims       0550     Octographic Service Outopathic therapy     90     Clinic     Notecovered revenue codes for psychiatic i for outpatient chims       0550     Octograph						
0515         Clinic         Performance         Performance           0516         Clinic         Pol         Clinic         Performance         Performance           0517         Clinic: Emaily Practice         Pol         Clinic         Performance         Performance           0518         Clinic: Clinic: Clinic         Pol         Clinic         Performance         Performance           0520         Free-Standing Clinic         Pol         Clinic         Noncovered revenue codes for general hop function requirement to have a corresponding CPT/RCPS code on subpatient clinins           0521         Rural bealth-clinic         Pol         Clinic         Clinic         Clinic           0524         RHC-FQHC visit in noncovered SNF         Pol         Excluded         Excernpt from requirement to have a corresponding CPT/RCPS code on subpatient clinins           0525         RHC-FQHC visit in noncovered SNF, NF, LCFMR or observations         Pol         Excluded         Excluded         Clinic         Noncovered revenue codes for general hop billing psychiatric of substance abuse service           0526         RHC-FQHC visit in noncovered SNF, NF, LCFMR or observation         Pol         Excluded         Excluded         Clinic corresponding CPT/ACCS code on subpatient clinins           0526         Free-Standing Clini: Other         Pol         Excluded						
0510         Clinic: Unput care clinic         90         Clinic           0517         Clinic: Subpractice         90         Clinic           0518         Clinic: Subpractice         90         Clinic           0520         Free-Standing Clinic         90         Clinic         Noncovered revenue codes for goverilowing of human codes for goverilowing co						
017         Clinic: The Team Practice         90         Clinic           019         Clinic:         90         Clinic         Noncovered revenue codes for psychiatric home-avered revenue codes for psychiatric home-avered revenue codes for general hosp billing psychiatric of substance abuse service           0521         Rural health-clinic         99         Clinic         Exong from requirement to have a corresponding CPTHCPCS code on outpatient clinics           0521         Rural health-clinic         99         Exoluted         Exong from requirement to have a corresponding CPTHCPCS code on outpatient clinics           0524         RHCPQHC visit in Part A covered SNF         99         Excluded         Exempt from requirement to have a corresponding CPTHCPCS code on outpatient clinics           0525         RHCPQHC visit in noncovered SNF, NF, ICPMR or other         99         Excluded         Exempt from requirement to have a corresponding CPTHCPCS code on outpatient clinics           0526         RHCPQHC visit in noncovered SNF, NF, ICPMR or other         99         Excluded         Exempt from requirement to have a corresponding CPTHCPCS code on outpatient clinics           0520         Free-Standing Clinic: Other         90         Excluded         Exempt from requirement to have a corresponding CPTHCPCS code on outpatient clinics           0530         Obserptific Services         999         Excluded         Exempt from requirement to have a corresponding CPTHCPCS						
0519         Clinic: Other clinic         90         Clinic         Noncovered revenue codes for psychiatric homowerd revenue codes for psychiatric of substance abus servic           0520         Free-Standing Clinic         90         Clinic         Noncovered revenue codes for psychiatric of substance abus servic           0521         Rural health-clinic         909         Excluded         corresponding CPT/HCPCS code           0523         Family Practice Clinic         90         Clinic         ince         ince           0524         RHCFQHC visit in Part A covered SNF         999         Excluded         corresponding CPT/HCPCS code           0525         RHCFQHC visit in noncovered SNF, NF, ICFMR or other         999         Excluded         Exempt from requirement to have a conresponding CPT/HCPCS code           0529         Free-Standing Clinic: Other         90         Clinic         Noncovered revenue codes for psychiatric for nonceparited revenue codes for general hosp obling psychiatric of substance abus service           0520         Free-Standing Clini: Other         90         Clinic         Noncovered revenue codes for general hosp obling psychiatric of substance abus service           0530         Ostcopathic Services: Odecopathic service         999         Excluded         Noncovered revenue codes for psychiatric of substance abus service           0540         Anbalane         999		0				
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0520         Pres-Standing Clinic         90         Clinic         noncovered revenue codes for general houp billing psychiatric of substance abuse service corresponding CPT/IE/CS code on outpattent claims           0521         Runi health-clinic         90         Clinic         Exempt from requirement to have a corresponding CPT/IE/CS code on outpattent claims           0523         Family Practice Clinic         90         Clinic         Exempt from requirement to have a corresponding CPT/IE/CS code on outpattent claims           0524         RHC/FQHC visit in Part A covered SNF         999         Excluded         corresponding CPT/IE/CS code on outpattent claims           0525         RHC/FQHC visit in noncovered SNF, NF, ICFMR or other         999         Excluded         corresponding CPT/IE/CS code on outpattent claims           0529         Pree-Standing Clinic: Other         90         Clinic         Noncovered revenue codes for general hoop billing psychiatric of substance abuse service on outpattent claims           0530         Osteopathic Services: Other osteopathic therapy         999         Excluded         noncovered revenue codes for general hoop billing psychiatric of substance abuse service           0540         Ambulance         999         Excluded         Nortswered revenue codes for general hoop billing psychiatric of substance abuse service           0541         Osteopathic Services: Other osteopathic services         999         Excluded	0519	Clinic: Other clinic	90	Clinic		
0521     Rural health-clinic     999     Excluded     corresponding CPT/HCPCS code on outpatient clims       0523     Family Practice Clinic     90     Clinic     Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient clims       0524     RHCFQHC visit in Part A covered SNF     999     Excluded     Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient clims       0525     RHCFQHC visit in noncovered SNF, NF, ICFMR or other     999     Excluded     Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient clims       0529     free-Standing Clinic: Other     900     Clinic     Noncovered revenue codes for psychiatric h noncovered revenue codes for general hosp biling psychiatric of substance services       0510     Osteopathic Services: Osteopathic therapy     999     Excluded     Noncovered revenue codes for psychiatric of substance service       0531     Osteopathic Services: Osteopathic services     999     Excluded     Noncovered revenue codes for psychiatric of substance service       0541     Stypplies     999     Excluded     Nonbilible for bill type 013X       0543     Harbulance     999     Excluded     Nonbilible for bill type 013X       0544     Oxygen     999     Excluded     Nonbilible for bill type 013X       0544     Oxygen     999     Excluded     Nonbilible for bill type 013X       0544	0520	Free-Standing Clinic	90	Clinic		Noncovered revenue codes for psychiatric hospitals; noncovered revenue codes for general hospitals billing psychiatric of substance abuse services
0524         RLCFQHC visit in Part A covered SNF         999         Excluded         Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims           0525         RHCFQHC visit in noncovered SNF, NF, ICFMR or other         999         Excluded         Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims           0529         Fee-Standing Clinic: Other         90         Excluded         Noncovered revenue codes for psychiatric h noncovered revenue codes for general hosp billing psychiatric of substance abuse service           0530         Osteopathic Services:         909         Excluded         Noncovered revenue codes for general hosp billing psychiatric of substance abuse service           0531         Osteopathic Services: Osteopathic herrapy         999         Excluded         Nonbillable for bill type 013X           0540         Ambulance         999         Excluded         Nonbillable for bill type 013X           0541         Supplies         999         Excluded         Nonbillable for bill type 013X           0543         Heart Mobile         999         Excluded         Nonbillable for bill type 013X           0544         Oxygen         999         Excluded         Nonbillable for bill type 013X           0545         Ar ambulance         999         Excluded         Nonbillable for bill type 013X <t< td=""><td>0521</td><td>Rural health-clinic</td><td>999</td><td>Excluded</td><td>corresponding CPT/HCPCS code</td><td></td></t<>	0521	Rural health-clinic	999	Excluded	corresponding CPT/HCPCS code	
0524         RHC/EQHC visit in Part A covered SNF         999         Excluded         corresponding CPT/HCPCS code on outpatient claims           0525         RHC/EQHC visit in noncovered SNF, NF, ICFMR or other         999         Excluded         Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims           0525         Free-Standing Clinic: Other         90         Clinic         Noncovered revenue codes for general hosp billing prychiatric of noncovered revenue codes for general hosp billing prychiatric of subtance abuse service           0530         Osteopathic Services: Other osteopathic services         999         Excluded         noncovered revenue codes for general hosp billing prychiatric of subtance abuse service           0530         Osteopathic Services: Other osteopathic services         999         Excluded         noncovered revenue codes for general hosp billing prychiatric of subtance abuse service           05431         Osteopathic Services: Other osteopathic services         999         Excluded         Nonbillable for bill type 013X           0544         Ambulance         999         Excluded         Nonbillable for bill type 013X           0544         Supplies         999         Excluded         Nonbillable for bill type 013X           0544         Oxygen         999         Excluded         Nonbillable for bill type 013X           0545         Ar arnbulance services	0523	Family Practice Clinic	90	Clinic		
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0569     Home Health (HH) Medical Social Services: Other Medical Social Services     76     Other Ancillary Services		Home Health (HH) Medical Social Services: Other				



0571         Vi           0572         Ha           0579         Oi           0580         Ha           0581         Vi           0582         Ha           0583         Gradientic State           0584         Vi           0585         Ha           0589         Oi           0590         Ha           0599         RI           0600         Ha           0600         Ha           0600         Co           0602         Oo	Revenue Code Description           Home health-Home health aide           Visit charge           Hourly charge           Ourly charge           Other home health aide           Home health-other visits           Visit charge           Ourly charge           Ourly charge           Other home health visit           Hourd health visit	Center Code CMS 2552-10 999 999 999 999 999 999 999 999	Cost Center Description Excluded Excluded Excluded Excluded	Comment	Non-Allowed Per Wisconsin ForwardHealth Policy Nonbillable for bill type 013X Nonbillable for bill type 013X
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0579 00 0580 H4 0581 Vi 0582 H4 0589 00 0590 H4 0599 R1 0600 H4 0601 02 0602 02	Dther home health aide Home health-other visits Visit charge Hourly charge Dther home health visit Home health-units of service	999 999 999	Excluded		
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0582         Ha           0589         Od           0590         Ha           0599         RI           0600         Ha           0601         Od           0602         Od	Hourly charge           Other home health visit           Home health-units of service		Excluded		Nonbillable for bill type 013X
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0599 RI 0600 He 0601 O: 0602 O:		999	Excluded		Nonbillable for bill type 013X
0601 O: 0602 O:	RESERVED	999	Excluded		Noncovered revenue codes "Reserved for Future
0601 O: 0602 O:	T 1 1.1	000	P 1 1 1		Assignment"
0602 O:	Home health-oxygen	999	Excluded		Nonbillable for bill type 013X
	Dxygen-state/equip/suppl/ or cont	999 999	Excluded		Nonbillable for bill type 013X
	Dxygen-state/equip/suppl/ or under 1 LPM	999	Excluded		Nonbillable for bill type 013X
	Dxygen-state/equip/over 4 LPM	999	Excluded		Nonbillable for bill type 013X
	Dxygen-Portable Add-on	999	Excluded		Nonbillable for bill type 013X
	Other oxygen Magnetic Resonance Tech. (MRT)	54	Excluded Magnetic Resonance Imaging (MRI)		Noncovered revenue codes
0611 M	Magnetic Resonance Tech. (MRT): Brain (incl.	54	Magnetic Resonance Imaging (MRI)		
0612 M	Brainstem) Magnetic Resonance Tech. (MRT): Spinal cord (incl.	54	Magnetic Resonance Imaging (MRI)		
sp	pine)	54			
	Magnetic Resonance Tech. (MRT): MRI - Other Magnetic Resonance Tech. (MRT): MRA - Head and	54	Magnetic Resonance Imaging (MRI)		<u> </u>
0615	Naghetic Resonance Tech. (MRT): MRA - Head and Neck	54	Magnetic Resonance Imaging (MRI)		
	Magnetic Resonance Tech. (MRT): MRA - Lower Ext	54	Magnetic Resonance Imaging (MRI)		
	Magnetic Resonance Tech. (MRT): MRA - Other	54	Magnetic Resonance Imaging (MRI)		
0619 M	Magnetic Resonance Tech. (MRT): Other MRT	54	Magnetic Resonance Imaging (MRI)		
0621 M	Med - Surg Supplies Ext. of 270: Incident to radiology	71	Medical Supplies		
0622 M	Med - Surg Supplies Ext. of 270: Incident to other diag.	71	Medical Supplies		
0623 Su	Surgical dressings	71	Medical Supplies		
0624 M	Med - Surg Supplies Ext. of 270: Investigational Device	999	Eveluded		Newseyrend arrange as dea
0624 (II	IDE)	999	Excluded		Noncovered revenue codes
0630 RI	RESERVED	999	Excluded		
0631 Di	Drugs Require Specific ID: Single source drug	73	Drugs Charged to Patients		
0632 Di	Drugs Require Specific ID: Multiple source drug	73	Drugs Charged to Patients		
	Drugs Require Specific ID: Restrictive prescription	73	Drugs Charged to Patients		
0634 Di	Drugs Require Specific ID: EPO under 10,000 units	73	Drugs Charged to Patients		
0635 Di	Drugs Require Specific ID: EPO over 10,000 units	73	Drugs Charged to Patients		
0636 Di	Drugs Require Specific ID: Drugs requiring detail coding	73	Drugs Charged to Patients		
	Drugs Require Specific ID: Self admin drugs (insulin admin in emergency-diabetes coma)	999	Excluded		Noncovered revenue codes
	RESERVED	999	Excluded		
	Home IV Therapy Services	999	Excluded		
	Hospice service	999	Excluded		Nonbillable for bill type 013X
	outine home care	999	Excluded		Nonbillable for bill type 013X
0652 co	continuous home care	999	Excluded		Nonbillable for bill type 013X
0653 RI	RESERVED	999	Excluded		Nonbillable for bill type 013X
0654 RI	RESERVED	999	Excluded		Nonbillable for bill type 013X
	npatient respite care	999	Excluded		Nonbillable for bill type 013X
	general inpatient care (non-respite)	999	Excluded		Nonbillable for bill type 013X
0657 ph	physician services	999	Excluded		Nonbillable for bill type 013X
	Hospice Room & Board - Nursing Facility	999	Excluded		
	Other hospice service	999	Excluded		Nonbillable for bill type 013X
0660 Re	Respite Care	999	Excluded		Noncovered revenue codes
	Hourly Respite Care Charge Nursing	999	Excluded		Noncovered revenue codes
0662	Hourly Respite Care Charge Aide/Homemaker/Companion	999	Excluded		Noncovered revenue codes
	Daily Respite Charge	999	Excluded		Noncovered revenue codes
0664 RI	RESERVED	999	Excluded		Noncovered revenue codes
0665 RI	RESERVED	999	Excluded		Noncovered revenue codes
0666 RI	RESERVED	999	Excluded		Noncovered revenue codes
	RESERVED	999	Excluded		Noncovered revenue codes
	RESERVED	999	Excluded		Noncovered revenue codes
	Other respite care	999	Excluded	1	Noncovered revenue codes
	Dutpatient Special Residence Charges	999	Excluded		Noncovered revenue codes
	Hospital based	999	Excluded		Noncovered revenue codes
	Contracted	999	Excluded		Noncovered revenue codes
	RESERVED	999	Excluded		Noncovered revenue codes
	RESERVED	999	Excluded		Noncovered revenue codes



Revenue Code	Revenue Code Description	Cost Center Code CMS 2552-10 999	Cost Center Description	Comment	Non-Allowed Per Wisconsin ForwardHealth Policy
0675	RESERVED	999	Excluded		Noncovered revenue codes Noncovered revenue codes
0677	RESERVED	999	Excluded		Noncovered revenue codes
0678	RESERVED	999	Excluded		Noncovered revenue codes
0679	Other special residence charge	999	Excluded		Noncovered revenue codes
0681	Trauma Response: Level I	999	Emergency Room		Noncovered revenue codes
0682	Trauma Response: Level II	91	Emergency Room		
0683	Trauma Response: Level III	91	Emergency Room		
0684	Trauma Response: Level IV	91	Emergency Room		
0689	Trauma Response: Other	91	Emergency		
0700	Cast Room	91	Emergency Room		
0710	Recovery Room	51	Recovery Room	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
0719	RESERVED	999	Excluded		Noncovered revenue codes "Reserved for Future Assignment"
0720	Labor Room	52	Delivery Room & Labor Room		
0721	Labor Room: Labor	52	Delivery Room & Labor Room		
0722	Labor Room: Delivery	52	Delivery Room & Labor Room		
0723	Labor Room: Circumcision	52	Delivery Room & Labor Room		
0724	Labor Room: Birthing center	52	Delivery Room & Labor Room		
0729	Labor Room: Other labor room/delivery	52	Delivery Room & Labor Room		
0730	EKG/ECG	69	Electro cardiology		
0731	EKG/ECG: Holter monitor	69	Electro cardiology		
0732	EKG/ECG: Telemetry	69	Electro cardiology		
0739	EKG/ECG: Other EKG/ECG	69	Electro cardiology		
0740	EEG	54	Electroencephalography		
0749	RESERVED	999	Excluded		Noncovered revenue codes "Reserved for Future Assignment"
0750	Gastrointestinal	60	Laboratory		
0759	RESERVED	999	Excluded		Noncovered revenue codes "Reserved for Future Assignment"
0760	Treatment/Observation Room	92	Observation Beds		
0761 0762	Treatment/Observation Room: Treatment room	92 92	Observation Beds Observation Beds	Deres is the strength of the	
0762	Treatment/Observation Room: Observation room Treatment/Observation Room: Other treatment room	92	Observation Beds Observation Beds	Revenue code for observation hours	
070	Preventive Care Services	90	Clinic		
0770	Preventive Care Services: Admin. of vaccine	90	Clinic		
0779	RESERVED	999	Excluded		Noncovered revenue codes "Reserved for Future Assignment"
0780	Telemedicine	93	Other Outpatient Services	Revenue code for telehealth services. Bill with HCPCS code Q3014 when submitting claims for telehealth originating site fees.	
0781	RESERVED	999	Excluded		
0782	RESERVED	999	Excluded		
0783	RESERVED	999	Excluded		
0784	RESERVED	999	Excluded		
0785	RESERVED	999	Excluded Excluded		
0786	RESERVED RESERVED	999 999	Excluded		
0787	RESERVED	999	Excluded	+	
0789	RESERVED	999	Excluded		Noncovered revenue codes "Reserved for Future Assignment"
0790	Extra-Corp Shock Wave Therapy	76	Other Ancillary Services		a sosigini felit
0790	Extra-Corp Shock wave Therapy	10	other Allemary Bervices		Noncovered revenue codes "Reserved for Future
0799	RESERVED	999	Excluded		Assignment"
0799 0800	RESERVED Inpatient Dialysis	999 999	Excluded		
0800	Inpatient Dialysis	999	Excluded		
0800 0801	Inpatient Dialysis Inpatient Hemodialysis Inpatient peritoneal dialysis inpatient dialysis CAPD	999 999	Excluded Excluded		
0800 0801 0802	Inpatient Dialysis Inpatient Hemodialysis Inpatient peritoneal dialysis	999 999 999	Excluded Excluded Excluded		
0800 0801 0802 0803	Inpatient Dialysis Inpatient Hemodialysis Inpatient peritoneal dialysis inpatient dialysis CAPD Inpatient dialysis CCPD Other inp dialysis	999 999 999 999	Excluded Excluded Excluded Excluded		
0800 0801 0802 0803 0804	Inpatient Dialysis Inpatient Hemodialysis Inpatient peritoneal dialysis inpatient dialysis CAPD Inpatient dialysis CCPD	999 999 999 999 999 999	Excluded Excluded Excluded Excluded Excluded		
0800 0801 0802 0803 0804 0809	Inpatient Dialysis Inpatient Hemodialysis Inpatient peritoneal dialysis inpatient dialysis CAPD Inpatient dialysis CCPD Other inp dialysis	999 999 999 999 999 999 999	Excluded Excluded Excluded Excluded Excluded Excluded		
0800 0801 0802 0803 0804 0809 0810 0811 0812	Inpatient Dialysis Inpatient Hemodialysis Inpatient peritoneal dialysis inpatient dialysis CAPD Inpatient dialysis CCPD Other inp dialysis Organ Acquisition	999 999 999 999 999 999 999 999 999 99	Excluded Excluded Excluded Excluded Excluded Excluded Excluded Excluded Excluded Excluded		
0800 0801 0802 0803 0804 0809 0810 0811 0812 0813	Inpatient Dialysis Inpatient Hemodialysis Inpatient peritoneal dialysis inpatient dialysis CAPD Inpatient dialysis CCPD Other inp dialysis Organ Acquisition Organ Acquisition: Living donor Organ Acquisition: Cadaver donor Organ Acquisition: Unknown donor	999 999 999 999 999 999 999 999 999 99	Excluded Excluded Excluded Excluded Excluded Excluded Excluded Excluded Excluded Excluded Excluded		
0800 0801 0802 0803 0804 0809 0810 0810 0811 0812 0813 0814	Inpatient Dialysis Inpatient Hemodialysis Inpatient peritoneal dialysis Inpatient dialysis CAPD Inpatient dialysis CCPD Other inp dialysis Organ Acquisition Organ Acquisition: Living donor Organ Acquisition: Cadaver donor Organ Acquisition: Unknown donor Organ Acquisition: Unknown donor Organ Acquisition: Unknown donor	999 999 999 999 999 999 999 999 999 99	Excluded Excluded Excluded Excluded Excluded Excluded Excluded Excluded Excluded Excluded Excluded Excluded		
0800 0801 0802 0803 0804 0809 0810 0811 0811 0812 0813 0814 0815	Inpatient Dialysis Inpatient Hemodialysis Inpatient Hemodialysis Inpatient dialysis CAPD Inpatient dialysis CAPD Other inp dialysis Organ Acquisition Organ Acquisition: Living donor Organ Acquisition: Cadaver donor Organ Acquisition: Unknown donor Organ Acquisition: Unsuccessful Search Organ Acquisition: Cadaver donor	999 999 999 999 999 999 999 999 999 99	Excluded Excluded Excluded Excluded Excluded Excluded Excluded Excluded Excluded Excluded Excluded Excluded Excluded Excluded		
0800 0801 0802 0803 0804 0809 0810 0811 0811 0812 0813 0814	Inpatient Dialysis Inpatient Hemodialysis Inpatient peritoneal dialysis Inpatient dialysis CAPD Inpatient dialysis CCPD Other inp dialysis Organ Acquisition Organ Acquisition: Living donor Organ Acquisition: Cadaver donor Organ Acquisition: Unknown donor Organ Acquisition: Unknown donor Organ Acquisition: Unknown donor	999 999 999 999 999 999 999 999 999 99	Excluded Excluded Excluded Excluded Excluded Excluded Excluded Excluded Excluded Excluded Excluded Excluded	Exempt from member copayment	



Revenue Code	Revenue Code Description	Cost Center Code CMS 2552-10	Cost Center Description	Comment	Non-Allowed Per Wisconsin ForwardHealth Policy
0821	Hemo OPD/Home: Hemodialysis comp or other rate	74	Renal Dialysis	Exempt from member copayment	
0824	Hemo OPD/Home Maintenance 100%	999	Excluded	Exempt from member copayment	
	Hemo OPD/Home: Support Services	74	Renal Dialysis	Exempt from member copayment	
0829 0830	Hemo OPD/Home: Other HEMO outpatient Peritoneal OPD/Home	74 74	Renal Dialysis Renal Dialysis	Exempt from member copayment Exempt from member copayment	
0830	Peritoneal/Composite or Other Rate	74	Renal Dialysis	Exempt from member copayment	
0832	Home supplies	999	Excluded	Exempt from member copayment	
0837	Home IV Therapy Services	999	Excluded	Exempt from member copayment	
0840	Support Services	74	Renal Dialysis	Exempt from member copayment	
0841	Support Services	74	Renal Dialysis	Exempt from member copayment	
0842	Support Services	74 74	Renal Dialysis	Exempt from member copayment	
0845 0850	Support Services Support Services	74	Renal Dialysis Renal Dialysis	Exempt from member copayment Exempt from member copayment	
0851	CCPD/Composite or Other Rate	74	Renal Dialysis	Exempt from member copayment	
0855	Support Services	74	Renal Dialysis	Exempt from member copayment	
0860	Magnetoencephalography (MEG)	69	Electro cardiology		
0861	MEG	69	Electro cardiology		
0880	Miscellaneous Dialysis	999	Excluded	Limited to three emergency dialysis	treatments per member, per year
0881	Miscellaneous Dialysis: Ultrafiltration	74	Renal Dialysis		
0882	Home dialysis aid visit Miscellaneous Dialysis: Other misc dialysis	999 74	Excluded Renal Dialysis		
	RESERVED	999	Excluded		
	Psychiatric/Psychological Trt	76	Other Ancillary Services		
	Psychiatric/Psychological Trt: Electroshock treatment	76	Other Ancillary Services	Exempt from member copayment	
0904	Psychiatric/Psychological Trt: Activity therapy	76	Other Ancillary Services		
0905	Intensive Outpatient Services: Psychiatric	76	Other Ancillary Services		
0906	Psychiatric/Psychological Trt: Intensive out serv - chem dep	76	Other Ancillary Services		
0907	Psychiatric/Psychological Trt: Comm behavioral program	76	Other Ancillary	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
0910	RESERVED	999	Excluded		
0911	Psychiatric/Psychological Svcs: Rehabilitation	76	Other Ancillary Services		
0912	Psychiatric/Psychological Svcs: Partial Hosp - less intensive	999	Excluded		Nonbillable for bill type 013X
0913	Psychiatric/Psychological Svcs: Partial Hosp - Intensive	999	Excluded		Nonbillable for bill type 013X
0914	Psychiatric/Psychological Svcs: Individual therapy	76	Other Ancillary Services		
0915 0916	Psychiatric/Psychological Svcs: Group therapy Psychiatric/Psychological Svcs: Family therapy	76	Other Ancillary Services		
	Psychiatric/Psychological Svcs: Family therapy Psychiatric/Psychological Svcs: Biofeedback	76	Other Ancillary Services Other Ancillary Services		
	Psychiatric/Psychological Svcs: Testing	76	Other Ancillary Services	Exempt from member copayment	
0919	Psychiatric/Psychological Svcs: Other behavioral treat/serv	76	Other Ancillary Services		
0920	Other Diagnostic Services	76	Other Ancillary Services		
0921	Other Diagnostic Services: Peripheral vascular lab	76	Other Ancillary Services		
	Other Diagnostic Services: Electromyelogram	76	Other Ancillary Services		
0923	Other Diagnostic Services: Pap smear	76	Other Ancillary Services		
0924 0925	Other Diagnostic Services: Allergy test Other Diagnostic Services: Pregnancy test	76 76	Other Ancillary Services Other Ancillary Services		
0923	Other Diagnostic Services: Pregnancy test Other Diagnostic Services: Other diagnostic services	76	Other Ancillary Services		
0930	Medical Rehabilitation Day Program	76	Other Ancillary Services		
0931	Medical Rehabilitation Half-Day Program	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
0940	Other Therapeutic Serv	76	Other Ancillary Services		Noncovered revenue codes for psychiatric hospitals; noncovered revenue codes for general hospitals billing psychiatric of substance abuse services
0941	Other Therapeutic Serv: Recreation Rx	76	Other Ancillary Services		
0942	Other Therapeutic Serv: Educ/training	76	Other Ancillary Services		
0943	Other Therapeutic Serv: Cardiac rehab	76	Other Ancillary Services		
0944 0945	Other Therapeutic Serv: Drug rehab	76	Other Ancillary Services		
	Other Therapeutic Serv: Alcohol rehab Complex medical equipment-Routine	76	Other Ancillary Services Other Ancillary Services		
0946					



Revenue Code	Revenue Code Description	Cost Center Code CMS 2552-10	Cost Center Description	Comment	Non-Allowed Per Wisconsin ForwardHealth Policy
0948	Pulmonary Rehabilitation	65	Respiratory Therapy	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
0949	Other Therapeutic Serv: Additional RX SVS	76	Other Ancillary Services		Noncovered revenue codes for psychiatric hospitals; noncovered revenue codes for general hospitals billing psychiatric of substance abuse services
0951	Other therapeutic services-(940x) Athletic training	76	Other Ancillary Services		
0952 0953	Other therapeutic services-(940x) Kinesiotherapy Other Services	76 76	Other Ancillary Services		
0933	Professional fees	999	Other Ancillary Services Excluded		
0961	Psychiatric	999	Excluded		
0962	Ophthalmology	999	Excluded		
0963	Anesthesiologist (MD)	999	Excluded		
0964	Anesthetist (CRNA)	999	Excluded		
0969 0971	Other professional fee Professional fees (096x) Laboratory	999 999	Excluded Excluded		
0971	Professional fees (096x) Laboratory Professional fees (096x) Radiology-Diagnostic	999	Excluded		
0972	Professional fees (096x) Radiology Diagnostic	999	Excluded		
0974	Professional fees (096x) Radiology-nuclear medicine	999	Excluded		
0975	Professional fees (096x) Operating room	999	Excluded		
0976	Professional fees (096x) Respiratory Therapy	999	Excluded		
0977 0978	Professional fees (096x) Physical therapy Professional fees (096x) Occupational therapy	999 999	Excluded Excluded		
0978	Professional fees (096x) Speech pathology	999	Excluded		
0981	Professional fees (096x) Emergency room	999	Excluded		
0982	Professional fees (096x) Outpatient services	999	Excluded		
0983	Professional fees (096x) clinic	999	Excluded		
0984	Professional fees (096x) medical social services	999	Excluded		
0985 0986	Professional fees (096x) EKG Professional fees (096x) EEK	999 999	Excluded Excluded		
0987	Professional fees (090x) EEK Professional fees (096x) Hospital visit	999	Excluded		
0988	Professional fees (096x) Consultation	999	Excluded		
0989	Private duty nurse	999	Excluded		
0990	Patient convenience items	999	Excluded		Noncovered revenue codes; nonbillable for bill type 013X
0991	Cafeteria/guest tray	999	Excluded		Noncovered revenue codes; nonbillable for bill type 013X
0992	private linen service	999	Excluded		Noncovered revenue codes; nonbillable for bill type 013X Noncovered revenue codes; nonbillable for bill type
0993	telephone/telegraph	999	Excluded		013X Noncovered revenue codes; nonbillable for bill type
0994	TV/radio	999	Excluded		013X Noncovered revenue codes; nonbillable for bill type
0995	Nonpatient room rentals	999	Excluded		013X
0996	Late discharge charge	999	Excluded		Noncovered revenue codes; nonbillable for bill type 013X Noncovered revenue codes; nonbillable for bill type
0997	admission kits	999	Excluded		013X Noncovered revenue codes; nonbillable for bill type
0998	Beauty shop/barber	999	Excluded		013X Noncovered revenue codes; nonbillable for bill type
0999	Other patient convenience item	999	Excluded		013X
1000	Behavioral health accommodations	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
1001	Residential treatment-psychiatric	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
1002	residential treatment-chemical dependency	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
1003	Supervised living	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	



State of Wisconsin Department of Health Services Division of Medicaid Services RY 2024 Outpatient Revenue Code Crosswalk To Suggested Cost Centers

Revenue Code	Revenue Code Description	Cost Center Code CMS 2552-10	Cost Center Description	Comment	Non-Allowed Per Wisconsin ForwardHealth Policy
1004	halfway house	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
1005	group home	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
1006	RESERVED	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
1007	RESERVED	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
1008	RESERVED	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
1009	RESERVED	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
2100	Alternative therapy services	999	Excluded		
2101	acupuncture	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
2102	acupressure	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
2103	massage	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
2104	reflexology	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
2105	biofeedback	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
2106	hypnosis	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
2107	RESERVED	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
2108	RESERVED	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
2109	Other alternative therapy services	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
3100	RESERVED	999	Excluded		
3101	Adult day care, Medical and social, hourly	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
3102	Adult day care, social, hourly	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
3103	Adult day care, medical and social, daily	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	



State of Wisconsin Department of Health Services Division of Medicaid Services RY 2024 Outpatient Revenue Code Crosswalk To Suggested Cost Centers

Revenue Code	Revenue Code Description	Cost Center Code CMS 2552-10	Cost Center Description	Comment	Non-Allowed Per Wisconsin ForwardHealth Policy
3104	Adult day care, social, daily	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
3105	Adult foster care, daily	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
3106	RESERVED	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
3107	RESERVED	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
3108	RESERVED	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	
3109	Other adult care	999	Excluded	Exempt from requirement to have a corresponding CPT/HCPCS code on outpatient claims	