

| Revenue Code | Revenue Code Description | Cost Center Code CMS 2552-10 | Cost Center Description | Comment | Non-Allowed Per Wisconsin ForwardHealth Policy |
|-----------------|---|--|--|---------|---|
| 0001 | Total Charge | 999 | Excluded | | |
| | RESERVED | 999 | Excluded | | |
| | RESERVED RESERVED | 999 999 | Excluded Excluded | | |
| | Home Health PPS | 999 | Excluded | | |
| | IRF PPS | 999 | Excluded | | |
| | RESERVED | 999 | Excluded | | |
| 0030 | RESERVED | 999 | Excluded | | |
| 0032 | RESERVED | 999 | Excluded | | |
| | RESERVED | 999 | Excluded | | |
| | RESERVED | 999 | Excluded | | |
| | RESERVED | 999 999 | Excluded | | |
| | RESERVED RESERVED | 999 | Excluded Excluded | | |
| | RESERVED | 999 | Excluded | | |
| | RESERVED | 999 | Excluded | | |
| | RESERVED | 999 | Excluded | | |
| | RESERVED | 999 | Excluded | | |
| | RESERVED | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| | RESERVED | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| | Room & Board (Private) | 30 | Adults and Pediatrics (Routine Care) | | |
| | Medical/Surgical/Gyn | 30 | Adults and Pediatrics (Routine Care) | | |
| 0112 | OB D. V. C | 30 | Adults and Pediatrics (Routine Care) | | |
| | Pediatric Psychiatric | 30 40 | Adults and Pediatrics (Routine Care) | | |
| | Hospice | 999 | Subprovider - Psych Excluded | | Nonbillable revenue codes for bill type 011X |
| 0115 | Detoxification | 30 | Adults and Pediatrics (Routine Care) | | Nonomable revenue codes for our type of the |
| 0117 | Oncology | 30 | Adults and Pediatrics (Routine Care) | | |
| 0118 | Rehab | 41 | Subprovider - Rehab | | |
| 0119 | Other | 30 | Adults and Pediatrics (Routine Care) | | |
| 0120 | Room & Board (Semi-Private 2 beds) | 30 | Adults and Pediatrics (Routine Care) | | |
| 0121 | Medical/Surgical/Gyn | 30 | Adults and Pediatrics (Routine Care) | | |
| 0122 | OB | 30 | Adults and Pediatrics (Routine Care) | | |
| | Pediatric | 30 40 | Adults and Pediatrics (Routine Care) | | |
| 0124 0125 | Psychiatric Semi Private 2 bed hospice | 40 999 | Subprovider - Psych Excluded | - | |
| 0125 | Detoxification | 30 | Adults and Pediatrics (Routine Care) | | |
| 0127 | Oncology | 30 | Adults and Pediatrics (Routine Care) | | |
| 0128 | Rehab | 41 | Subprovider - Rehab | | |
| 0129 | Other | 30 | Adults and Pediatrics (Routine Care) | | |
| 0130 | Room&Board (Semi private 3-4 beds) | 30 | Adults and Pediatrics (Routine Care) | | |
| 0131 | Medical/Surgical/Gyn | 30 | Adults and Pediatrics (Routine Care) | | |
| | OB | 30 | Adults and Pediatrics (Routine Care) | | |
| | Pediatric | 30 | Adults and Pediatrics (Routine Care) | | |
| 0134 | Psychiatric Hornica | 40 999 | Subprovider - Psych Excluded | | Nonhillahla rayanya oodee for hill tree 011V |
| | Hospice Rehab | 41 | Excluded Subprovider - Rehab | | Nonbillable revenue codes for bill type 011X |
| | Room & Board (Private Deluxe) | 999 | Excluded | | Noncovered revenue codes |
| 0141 | Medical/Surgical/Gyn | 999 | Excluded | | Noncovered revenue codes |
| 0142 | OB | 999 | Excluded | | Noncovered revenue codes |
| 0143 | Pediatric | 999 | Excluded | | Noncovered revenue codes |
| | Psychiatric | 999 | Excluded | | Noncovered revenue codes |
| | Hospice | 999 | Excluded | | Noncovered revenue codes |
| 0146 | Detoxification | 999 | Excluded | | Noncovered revenue codes |
| 0147 | Oncology | 999 | Excluded Excluded | | Noncovered revenue codes |
| 0148 0149 | Rehab Other | 999 999 | Excluded Excluded | | Noncovered revenue codes |
| | Other Room & Board (Ward) | 30 | Excluded Adults and Pediatrics (Routine Care) | | Noncovered revenue codes |
| 0150 | OB | 30 | Adults and Pediatrics (Routine Care) | | |
| | PEDIATRIC/WARD | 30 | Adults and Pediatrics (Routine Care) | | |
| | Psychiatric | 40 | Subprovider - Psych | | |
| | Hospice | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0157 | Oncology | 30 | Adults and Pediatrics (Routine Care) | | |
| 0160 | Room & Board (other) | 30 | Adults and Pediatrics (Routine Care) | | |



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| | Sterile Environment | 30 | Adults and Pediatrics (Routine Care) | | |
| | Room & Board (other) | 30 | Adults and Pediatrics (Routine Care) | | |
| 0170 | Nursery | 43 | Nursery | | |
| | Newborn-Level I | 43 | Nursery | | |
| 0172 | Newborn-Level II | 43 | Nursery | | |
| 0173 | Newborn-Level III | 35 | Neonate Intensive Care Unit | Defaulted to Nursery if no cost data | |
| 0174 | Newborn-Level IV | 35 | Neonate Intensive Care Unit | Defaulted to Nursery if no cost data | |
| 0179 | Other Nursery | 43 | Nursery | | |
| 0180 | Leave of Absence | 999 | Excluded | | Noncovered revenue codes; Billable, noncovered revenue code |
| 0181 | RESERVED | 999 | Excluded | | Noncovered revenue codes |
| 0182 | Patient Convenience | 999 | Excluded | | Noncovered revenue codes |
| 0183 | Therapeutic Leave | 999 | Excluded | | Noncovered revenue codes |
| 0184 | RESERVED | 999 | Excluded | | Noncovered revenue codes |
| 0185 | Hospitalization | 999 | Excluded | | Noncovered revenue codes |
| 0186 | RESERVED | 999 | Excluded | | Noncovered revenue codes |
| | RESERVED | 999 | Excluded | | Noncovered revenue codes |
| | RESERVED | 999 | Excluded | | Noncovered revenue codes |
| 0189 | Other leave of absence | 999 | Excluded | | Noncovered revenue codes |
| 0190 | SUBACUTE | 999 | Excluded | | Noncovered revenue codes |
| | SUBACUTE/SKILLED CARE LVL1 | 999 | Excluded | | Noncovered revenue codes |
| | Intensive care | 31 | Intensive Care Unit | | |
| | Surgical | 31 | Intensive Care Unit | | |
| | Medical | 31 | Intensive Care Unit | | |
| | Pediatric | 31 | Intensive Care Unit | | |
| | Psychiatric | 31 | Intensive Care Unit | | |
| | Intermediate ICU | 31 | Intensive Care Unit | | |
| | Burn care | 31 | Intensive Care Unit | | |
| | Trauma | 31 | Intensive Care Unit | | |
| | Other intensive care | 31 | Intensive Care Unit | | |
| | Coronary care | 31 | Intensive Care Unit | | |
| | Myocardial Infarction | 31 | Intensive Care Unit | | |
| | Pulmonary Care | 31 | Intensive Care Unit | | |
| | Heart Transplant | 31 31 | Intensive Care Unit Intensive Care Unit | | |
| | Intermediate CCU | | | | |
| 0219 | Other Coronary Care | 31 | Intensive Care Unit | Allowed when billing interpreter | |
| | Special charges | 76 | Other Ancillary Services | services on inpatient claims | |
| | Admission charge | 999 | Excluded | | Noncovered revenue codes |
| | U.R. service charge | 999 | Excluded | | Noncovered revenue codes |
| | Other special charges | 999 | Excluded | Y (INT) | Noncovered revenue codes |
| | Incremental nursing charge rate | 999 | Excluded | Incremental Nursing | |
| | Nursery OB | 999 999 | Excluded Excluded | Incremental Nursing Incremental Nursing | |
| | ICU | 999 | Excluded | Incremental Nursing | |
| | CCU | 999 | Excluded | Incremental Nursing | |
| | Hospice | 999 | Excluded | Incremental Nursing | |
| | Other | 999 | Excluded | Incremental Nursing | |
| | All-inclusive Ancillary | 999 | Excluded | smonth r thromg | Nonbillable revenue codes for bill type 011X |
| | All-inclusive Ancillary | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| | RESERVED | 999 | Excluded | 1 | Nonbillable revenue codes for bill type 011X |
| | Other all inclusive ancillary | 999 | Excluded | 1 | Nonbillable revenue codes for bill type 011X |
| | Pharmacy | 73 | Drugs Charged to Patients | 1 | · · · · · · · · · · · · · · · · · · · |
| | Pharmacy: Generic | 73 | Drugs Charged to Patients | | |
| | Pharmacy: Nongeneric | 73 | Drugs Charged to Patients | 1 | |
| | Take home drugs | 999 | Excluded | 1 | Nonbillable revenue codes for bill type 011X |
| | Pharmacy: Incident to other diagnostic services | 73 | Drugs Charged to Patients | 1 | |
| | Pharmacy: Incident to outer diagnostic services | 73 | Drugs Charged to Patients | 1 | |
| | Pharmacy: Experimental drugs | 73 | Drugs Charged to Patients | 1 | |
| | Pharmacy: Non-prescription | 73 | Drugs Charged to Patients | 1 | |
| | Pharmacy: IV solutions | 73 | Drugs Charged to Patients | | |
| 0400 | | | | | |



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|-----------------|---|--|--|---|---|
| 0260 | IV Therapy | 64 | Intravenous Therapy | | |
| 0261 | IV Therapy: Infusion pump | 64 | Intravenous Therapy | | |
| | IV Therapy: IV Therapy, pharm services | 64 | Intravenous Therapy | | |
| 0263 | IV Therapy: IV Therapy/drug/supp/delivery | 64 | Intravenous Therapy | | |
| 0264 | IV Therapy: IV Therapy/supplies | 64 | Intravenous Therapy | | |
| 815 | IV Therapy: supplies | 64 | Intravenous Therapy | | |
| 0269 | IV Therapy: Other IV therapy | 64 | Intravenous Therapy | | |
| 0270 | Medical/Surgical Supplies | 71 | Medical Supplies | | |
| 0271 | Medical/Surgical Supplies: Nonsterile supplies | 71 | Medical Supplies | | |
| 0272 | Medical/Surgical Supplies: Sterile supplies | 71 | Medical Supplies | | |
| 0273 0274 | Medical/Surgical Supplies: Take home supplies Medical/Surgical Supplies: Prosthetic/Orthotic devices | 71 71 | Medical Supplies Medical Supplies | | |
| 0275 | Madical/Surgical Supplies Decomplian | 71 | Imml Day Changed to Dationt | | |
| 0275 | Medical/Surgical Supplies: Pacemaker Medical/Surgical Supplies: Intraocular lens | 71 | Impl. Dev. Charged to Patient Impl. Dev. Charged to Patient | | |
| 0270 | Oxygen-Take home | 71 | Impl. Dev. Charged to Patient | | |
| 0277 | Medical/Surgical Supplies: Other implants | 71 | Impl. Dev. Charged to Patient | | |
| 0278 | Medical/Surgical Supplies: Other supplies/devices | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0279 | Oncology | 55 | Radiology - Therapeutic | | Tonomable revenue codes for onit type 011X |
| 0285 | RESERVED | 999 | Excluded | | 1 |
| 0290 | Durable Medical Equipment | 999 | Excluded | Non-allowed Cost Center for Inpatient Rate Setting | |
| 0291 | DME Rental | 999 | Excluded | Non-allowed Cost Center for Inpatient Rate Setting | Nonbillable revenue codes for bill type 011X |
| 0292 | Durable Medical Equipment: Purchase - new equipment | 999 | Excluded | Non-allowed Cost Center for Inpatient Rate Setting | Nonbillable revenue codes for bill type 011X |
| 0293 | Purchase of used DME | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0294 | Supplies/Drugs for DME effectiveness (HHA only) | 999 | Excluded | Non-allowed Cost Center for Inpatient Rate Setting | Noncovered revenue codes |
| 0299 | Durable Medical Equipment: Other equipment | 999 | Excluded | Non-allowed Cost Center for Inpatient Rate Setting | Nonbillable revenue codes for bill type 011X |
| 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 | Laboratory - Pathology: Biopsy | 60 | Laboratory | | |
| 0319 | Laboratory - Pathology: Other | 60 | Laboratory | | |
| 0320 | Radiology - Diagnostic | 54 | Radiology - Diagnostic | | |
| 0321 | Radiology - Diagnostic: Angiocardiography | 54 | Cardiac Catheterization | | |
| 0322 | Radiology - Diagnostic: Arthrography | 54 | Radiology - Diagnostic | | |
| 0323 | Radiology - Diagnostic: Arteriography | 54 | Radiology - Diagnostic | | l |
| 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 | | |
| 0333 | Radiology - Therapeutic: Radiation therapy | 55 | Radiology - Therapeutic | | |
| 0335 | Radiology - Therapeutic: Chemotherapy - IV | 55 | Radiology - Therapeutic | | + |
| | Radiology - Therapeutic: Other | 55 55 | Radiology - Therapeutic Radiology - Therapeutic | | |
| 0339 | Nuclear Medicine | | reamonogy - i nerapeutic | | |
| 0340 | Nuclear Medicine | | | | |
| 0340 0341 | Nuclear Medicine: Diagnostic | 54 | Radiology - Diagnostic | | |
| 0340 | | | | | |



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|-----------------|---|--|--|---------|---|
| 0349 0350 | Nuclear Medicine: Other | 54 54 | Radiology - Diagnostic CT Scan | | |
| 0350 | CT Scan CT Scan: Head | 54 | CT Scan | | |
| 0352 | CT Scan: Body | 54 | CT Scan | | |
| 0359 | CT Scan: Other CT scans | 54 | CT Scan | | |
| 0360 | Operating Room Services | 50 | Operating Room | | |
| 0361 | Operating Room Services: Minor surgery | 50 | Operating Room | | |
| 0362 | Operating Room Services: Organ transplant, not kidney | 198 | Aggregate Organ Acquisition | | |
| 0367 | Operating Room Services: Kidney transplant | 198 | Aggregate Organ Acquisition | | |
| 0369 | Operating Room Services: Other operating room services | 50 | Operating Room | | |
| 0370 | Anesthesia | 53 | Anesthesiology | | |
| 0371 | Anesthesia: Incident to radiology | 53 | Anesthesiology | | |
| 0372 | Anesthesia: Incident to other diag services | 53 | Anesthesiology | | |
| 0374 | Acupuncture | 999 | Excluded | | Noncovered revenue codes |
| 0379 0380 | Anesthesia: Other anesthesia Blood | 53 62 | Anesthesiology Whole Plood & Packed Ped Plood Calls | | |
| | Blood Blood: Packed red cells | 62 | Whole Blood & Packed Red Blood Cells Whole Blood & Packed Red Blood Cells | | |
| | Blood: Whole blood | 62 | Whole Blood & Packed Red Blood Cells | | |
| | Blood: Whole blood 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 | 62 | Whole Blood & Packed Red Blood Cells | | |
| 0387 | Blood: Other derivatives | 62 | Whole Blood & Packed Red Blood Cells | | |
| 0389 | Blood: Other blood | 62 | Whole Blood & Packed Red Blood Cells | | |
| 0390 | Blood Storage/Processing | 63 | Blood Storing, Processing, & Trans | | |
| 0391 | Blood: Administration (e.g. Transfusion) | 63 | Blood Storing, Processing, & Trans | | |
| 0399 | Other blood handling | 63 | Blood Storing, Processing, & Trans | | |
| 0400 | Other Imaging Services | 54 | Radiology - Diagnostic | | |
| 0401 | Other Imaging Services: Diagnostic mammography | 55 | Radiology - Therapeutic | | |
| 0402 | Other Imaging Services: Ultrasound | 55 | Radiology - Therapeutic | | |
| 0403 0404 | Other Imaging Services: Screening mammography | 54 54 | Radiology - Diagnostic Radiology - Diagnostic | | |
| 0404 0409 | Other Imaging Services: PET scan Other Imaging Services: Other imaging services | 54 | Radiology - Diagnostic | | |
| | Respiratory Services | 65 | Respiratory Therapy | | |
| | RESERVED | 999 | Excluded | | |
| | Respiratory Services: Inhalation services | 65 | Respiratory Therapy | | |
| 0413 | Respiratory Services: Hyperbaric oxygen therapy | 76 | Other Ancillary Services | | |
| 0419 | Respiratory Services: Other respiratory services | 65 | Respiratory Therapy | | |
| 0420 | Physical Therapy | 66 | Physical Therapy | | |
| 0421 | Physical Therapy: Visit charge | 66 | Physical Therapy | | |
| | Physical Therapy: Hourly charge | 66 | Physical Therapy | | |
| | Physical Therapy: Group rate | | Physical Therapy | | |
| | Physical Therapy: Evaluation/re-evaluation | 66 | Physical Therapy | | |
| 0429 | Physical Therapy: Other physical therapy | 66 | Physical Therapy | | |
| 0430 0431 | Occupational Therapy Occupational Therapy: Visit charge | 67 67 | Occupational Therapy Occupational Therapy | | |
| | Occupational Therapy: Visit charge Occupational Therapy: Hourly charge | 67 | Occupational Therapy Occupational Therapy | | |
| 0432 | Occupational Therapy: Group rate | 67 | Occupational Therapy | | |
| 0434 | Occupational Therapy: Evaluation/re-evaluation | 67 | Occupational Therapy | | |
| 0439 | Occupational Therapy: Other occupational therapy | 67 | Occupational Therapy | | |
| 0440 | Speech-Language Pathology | 68 | Speech Pathology | | |
| 0441 | Speech-Language Pathology: Visit charge | 68 | Speech Pathology | | |
| 0442 | Speech-Language Pathology: Hourly charge | 68 | Speech Pathology | | |
| 0443 | Speech-Language Pathology: Group rate | 68 | Speech Pathology | | |
| 0444 0448 | Speech-Language Pathology: Evaluation/ re-evaluation Speech-Language Pathology | 68 68 | Speech Pathology Speech Pathology | | |
| 0449 | Speech-Language Pathology: Other speech language pathology | 68 | Speech Pathology | | |
| 0450 | Emergency Room | 91 | Emergency Room | | |
| 0451 | Emergency Room: EM/EMTALA | 91 | Emergency Room | | |
| | Emergency Room: ER/ Beyond EMTALA | 91 | Emergency Room | 1 | İ |



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|-----------------|--|--|---|---|---|
| 0456 | Emergency Room: Urgent care | 91 | Emergency Room | | |
| 0459 | Emergency Room: Other emergency room | 91 | Emergency Room | | |
| 0460 | Pulmonary Function | 65 | Respiratory Therapy | | |
| 0469 | Pulmonary Function: Other | 65 | Respiratory Therapy | | |
| 0470 | Audiology | 76 | Other Ancillary Services | | |
| 0471 | Audiology: Diagnostic | 76 | Other Ancillary Services | | |
| 0479 | Audiology: Other audiology | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0480 | Cardiology | 69 | Electro cardiology | | |
| 0481 0482 | Cardiology: Cardiac catheter lab | 69 69 | Cardiac Catheterization Electro cardiology | | |
| 0482 | Cardiology: Stress test Cardiology: Echocardiology | 69 | Electro cardiology | | |
| 0485 | Cardiology: Other cardiology | 69 | Electro cardiology | | |
| 0489 | Ambulatory Surgery | 75 | ASC (Distinct Unit) | | |
| 0500 | Outpatient services | 90 | Clinic | | |
| 0510 | Clinic | 90 | Clinic | Revenue Code for medication checks | |
| 0511 | Clinic: Chronic pain center | 90 | Clinic | | |
| 0512 | Clinic: Dental clinic | 90 | Clinic | | |
| 0513 | Clinic: Psychiatric clinic | 90 | Clinic | | |
| 0514 | Clinic: OB/GYN clinic | 90 | Clinic | | |
| 0515 | Clinic: Pediatric clinic | 90 | Clinic | | |
| 0516 | Clinic: Urgent care clinic | 90 | Clinic | | |
| 0517 | Clinic: Family Practice | 90 | Clinic | | |
| 0519 | Clinic: Other clinic | 90 | Clinic | | |
| 0520 | Free-Standing Clinic | 90 | Clinic | | Noncovered revenue codes for psychiatric hospitals; Noncovered revenue codes for general hospitals billing psychiatric or substance abuse services |
| 0521 | Rural health-clinic | 999 | Excluded | Non-allowed Cost Center for Inpatient Rate Setting | |
| 0528 | RHC/FQHC visit to other non RHC/FQHC site | 999 | Excluded | Non-allowed Cost Center for Inpatient Rate Setting | |
| 0529 | Free-Standing Clinic: Other | 90 | Clinic | | Noncovered revenue codes for psychiatric hospitals; Noncovered revenue codes for general hospitals billing psychiatric or substance abuse services |
| 0530 | Osteopathic Services | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0531 | Osteopathic Services: Osteopathic therapy | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0539 | Osteopathic Services: Other osteopathic services | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0540 | Ambulance | 999 | Excluded | Non-allowed Cost Center for Inpatient Rate Setting | Nonbillable revenue codes for bill type 011X |
| 0541 | Supplies | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0542 | Medical Transport | 999 | Excluded | Non-allowed Cost Center for Inpatient Rate Setting | Nonbillable revenue codes for bill type 011X |
| | Heart Mobile | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0544 0545 | Oxygen Air ambulance | 999 999 | Excluded Excluded | Non-allowed Cost Center for Inpatient Rate Setting | Nonbillable revenue codes for bill type 011X Nonbillable revenue codes for bill type 011X |
| 0546 | Neonatal ambulance services | 999 | Excluded | Non-allowed Cost Center for Inpatient Rate Setting | Nonbillable revenue codes for bill type 011X |
| 0547 | Pharmacy | 999 | Excluded | 10 | Noncovered revenue codes |
| 0548 | Telephone Transmission EKG | 999 | Excluded | | Noncovered revenue codes |
| 0549 | Other ambulance | 999 | Excluded | Non-allowed Cost Center for Inpatient Rate Setting | Nonbillable revenue codes for bill type 011X |
| 0550 | Skilled nursing | 999 | Excluded | | Noncovered revenue codes |
| 0551 | Visit charge | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0552 | Hourly charge | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0559 | Other skilled nursing | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0560 | Home Health (HH) Medical Social Services | 76 | Other Ancillary Services | | |
| 0561 | Medical Social Services Visit Charge | 76 | Other Ancillary Services | | |
| 0569 | Home Health (HH) Medical Social Services: Other Medical Social Services | 76 | Other Ancillary Services | | |
| 0570 | Home health-Home health aide | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0571 | Visit charge | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0572 | Hourly charge | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0579 | Other home health aide | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |



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| 0580 | Home health-other visits | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0581 0582 | Visit charge Hourly charge | 999 999 | Excluded Excluded | | Nonbillable revenue codes for bill type 011X Nonbillable revenue codes for bill type 011X |
| 0582 | Other home health visit | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0589 | Home health-units of service | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| | | | | | Noncovered revenue codes "Reserved for Future |
| 0599 | RESERVED | 999 | Excluded | | Assignment" |
| 0600 | Home health-oxygen | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0601 | Oxygen-state/equip/suppl/ or cont | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0602 | Oxygen-state/equip/suppl/ or under 1 LPM | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0603 | Oxygen-state/equip/over 4 LPM | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0604 | Oxygen-Portable Add-on | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0609 | Other oxygen | 999 | Excluded | | Noncovered revenue codes |
| 0610 | Magnetic Resonance Tech. (MRT) | 54 | Magnetic Resonance Imaging (MRI) | | |
| 0611 | Magnetic Resonance Tech. (MRT): Brain (incl. Brainstem) | 54 | Magnetic Resonance Imaging (MRI) | | |
| 0612 | Magnetic Resonance Tech. (MRT): Spinal cord (incl. spine) | 54 | Magnetic Resonance Imaging (MRI) | | |
| 0614 | Magnetic Resonance Tech. (MRT): MRI - Other | 54 | Magnetic Resonance Imaging (MRI) | | |
| 0615 | Magnetic Resonance Tech. (MRT): MRA - Head and Neck | 54 | Magnetic Resonance Imaging (MRI) | | |
| 0616 | Magnetic Resonance Tech. (MRT): MRA - Lower Ext | 54 | Magnetic Resonance Imaging (MRI) | | |
| 0618 | Magnetic Resonance Tech. (MRT): MRA - Other | 54 | Magnetic Resonance Imaging (MRI) | | |
| 0619 0621 | Magnetic Resonance Tech. (MRT): Other MRT Med - Surg Supplies Ext. of 270: Incident to radiology | 54 71 | Magnetic Resonance Imaging (MRI) Medical Supplies | | |
| 0621 | Med - Surg Supplies Ext. of 270: Incident to radiology Med - Surg Supplies Ext. of 270: Incident to other diag. | 71 | Medical Supplies | | |
| | | | | | |
| 0623 | Surgical dressings | 71 | Medical Supplies | | |
| 0624 | Med - Surg Supplies Ext. of 270: Investigational Device (IDE) | 999 | Excluded | | Noncovered revenue codes |
| 0630 | RESERVED | 73 | Drugs Charged to Patients | | |
| 0631 | Drugs Require Specific ID: Single source drug | 73 | Drugs Charged to Patients | | |
| 0632 | Drugs Require Specific ID: Multiple source drug | 73 | Drugs Charged to Patients | | |
| 0634 0635 | Drugs Require Specific ID: EPO under 10,000 units Drugs Require Specific ID: EPO over 10,000 units | 73 73 | Drugs Charged to Patients Drugs Charged to Patients | | |
| 0033 | Drugs Require Specific ID: EPO over 10,000 units | 13 | · · · | | |
| 0636 | Drugs Require Specific ID: Drugs requiring detail coding Drugs Require Specific ID: Self admin drugs (insulin | 73 | Drugs Charged to Patients | | |
| 0637 | admin in emergency-diabetes coma) | 999 | Excluded | | Noncovered revenue codes |
| 0650 | Hospice service | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0651 | routine home care | 999 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0652 0653 | continuous home care RESERVED | 999 | Excluded Excluded | | Nonbillable revenue codes for bill type 011X Nonbillable revenue codes for bill type 011X |
| | RESERVED | 999 | Excluded | | Nonbillable revenue codes for bill type 011X Nonbillable revenue codes for bill type 011X |
| 0655 | inpatient respite care | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0655 | general inpatient care (non-respite) | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0657 | physician services | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0659 | Other hospice service | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0660 | Respite Care | 999 | Excluded | | Noncovered revenue codes |
| 0661 | Hourly Respite Care Charge Nursing | 999 | Excluded | | Noncovered revenue codes |
| 0662 | Hourly Respite Care Charge Aide/Homemaker/Companion | 999 | Excluded | | Noncovered revenue codes |
| 0663 | Daily Respite Charge | 999 | Excluded | | Noncovered revenue codes |
| 0664 | RESERVED | 999 | Excluded | | Noncovered revenue codes |
| 0665 | RESERVED | 999 | Excluded | | Noncovered revenue codes |
| 0666 | RESERVED | 999 | Excluded | | Noncovered revenue codes |
| 0667 | RESERVED | 999 | Excluded | | Noncovered revenue codes |
| 0668 | RESERVED | 999 | Excluded | | Noncovered revenue codes |
| 0669 | Other respite care | 999 | Excluded | | Noncovered revenue codes |
| 0670 | Outpatient Special Residence Charges | 999 | Excluded | | Noncovered revenue codes |
| 0671 | Hospital based | 999 | Excluded | | Noncovered revenue codes |
| 0672 | Contracted | 999 | Excluded | | Noncovered revenue codes |
| 0673 | RESERVED | 999 | Excluded | | Noncovered revenue codes |
| 0674 | RESERVED | 999 | Excluded | | Noncovered revenue codes |



| Revenue Code | Revenue Code Description | Cost Center Code CMS 2552-10 | Cost Center Description | Comment | Non-Allowed Per Wisconsin ForwardHealth Policy |
|-----------------|---|--|--|---------------------------------------|--|
| | RESERVED | 999 | Excluded | | Noncovered revenue codes |
| | RESERVED | 999 | Excluded | | Noncovered revenue codes |
| | RESERVED | 999 | Excluded | | Noncovered revenue codes |
| | RESERVED | 999 | Excluded | | Noncovered revenue codes |
| | Other special residence charge | 999 91 | Excluded | | Noncovered revenue codes |
| | Trauma Response: Level I | 91 | Emergency Room | | |
| | Trauma Response: Level II Trauma Response: Level III | 91 | Emergency Room | | |
| | Trauma Response: Level IV | 91 | Emergency Room Emergency Room | | |
| | Cast Room | 91 | Emergency Room | | |
| | RESERVED | 999 | Excluded | | Noncovered revenue codes "Reserved for Future Assignment" |
| 0710 H | Recovery Room | 51 | Recovery Room | | Assignment |
| | RESERVED | 999 | Excluded | | Noncovered revenue codes "Reserved for Future Assignment" |
| 0720 I | Labor Room | 52 | Delivery Room & Labor Room | | rissignment |
| | Labor Room: Labor | 52 | Delivery Room & Labor Room | 1 | |
| | Labor Room: Delivery | 52 | Delivery Room & Labor Room | 1 | |
| | Labor Room: Circumcision | 52 | Delivery Room & Labor Room | | |
| 0724 I | Labor Room: Birthing center | 52 | Delivery Room & Labor Room | | |
| | Labor Room: Other labor room/delivery | 52 | Delivery Room & Labor Room | | |
| 0730 I | EKG/ECG | 69 | Electro cardiology | | |
| 0731 I | EKG/ECG: Holter monitor | 69 | Electro cardiology | | |
| 0732 I | EKG/ECG: Telemetry | 69 | Electro cardiology | | |
| 0739 I | EKG/ECG: Other EKG/ECG | 69 | Electro cardiology | | |
| 0740 I | EEG | 70 | Electroencephalography | | |
| 0749 I | RESERVED | 999 | Excluded | | Noncovered revenue codes "Reserved for Future Assignment" |
| 0750 | Gastrointestinal | 60 | Laboratory | | |
| 0759 H | RESERVED | 999 | Excluded | | Noncovered revenue codes "Reserved for Future Assignment" |
| 0760 | Treatment/Observation Room | 92 | Observation Beds | | |
| 0761 | Treatment/Observation Room: Treatment room | 92 | Observation Beds | | |
| | Treatment/Observation Room: Observation room | 92 | Observation Beds | Revenue code for observation hours | |
| | Treatment/Observation Room: Other treatment room | 92 | Observation Beds | | |
| | Preventive Care Services | 90 | Clinic | - | |
| 0771 I | Preventive Care Services: Admin. of vaccine | 90 | Clinic | | |
| | RESERVED | 999 | Excluded | | Noncovered revenue codes "Reserved for Future Assignment" |
| | Telemedicine | 999 | Excluded | | Noncovered revenue codes |
| | RESERVED | 999 | Excluded | | Noncovered revenue codes |
| | RESERVED | 999 | Excluded | | Noncovered revenue codes |
| | RESERVED | 999 | Excluded | | Noncovered revenue codes |
| | RESERVED RESERVED | 999 999 | Excluded Excluded | + | Noncovered revenue codes Noncovered revenue codes |
| | RESERVED | 999 | Excluded | | Noncovered revenue codes |
| | RESERVED | 999 | Excluded | | Noncovered revenue codes |
| | RESERVED | 999 | Excluded | 1 | Noncovered revenue codes |
| | RESERVED | 999 | Excluded | | Noncovered revenue codes "Reserved for Future Assignment" |
| 0790 I | Extra-Corp Shock Wave Therapy | 76 | Other Ancillary Services | | ~ |
| | RESERVED | 999 | Excluded | | Noncovered revenue codes "Reserved for Future Assignment" |
| | Inpatient Dialysis | 74 | Renal Dialysis | | |
| | Inpatient Hemodialysis | 74 | Renal Dialysis | | |
| | Inpatient peritoneal dialysis | 74 | Renal Dialysis | | |
| | Inpatient dialysis CAPD | 74 | Renal Dialysis | | |
| | Inpatient dialysis CCPD | 74 | Renal Dialysis | | |
| | Other inp dialysis | 74 | Renal Dialysis | | |
| | Organ Acquisition | 198 | Aggregate Organ Acquisition | | |
| | | | | | |
| 0811 | Organ Acquisition: Living donor Organ Acquisition: Cadaver donor | 198 198 | Aggregate Organ Acquisition Aggregate Organ Acquisition | | |



| Revenue Code | Revenue Code Description | Cost Center Code CMS 2552-10 | Cost Center Description | Comment | Non-Allowed Per Wisconsin ForwardHealth Policy |
|-----------------|---|--|--|------------------------------|---|
| 0814 | Organ acquisition - unsuccessful organ search-donor bank charges | 198 | Aggregate Organ Acquisition | | |
| 0815 | Allogenic Stem Cell Acquisition/Donor Services | 198 | Aggregate Organ Acquisition | | |
| 0819 | Organ Acquisition: Other donor | 198 | Aggregate Organ Acquisition | | |
| 0820 | Hemo OPD/Home | 74 | Renal Dialysis | Exempt from member copayment | |
| 0821 | Hemo OPD/Home: Hemodialysis comp or other rate | 74 | Renal Dialysis | Exempt from member copayment | |
| 0829 | Hemo OPD/Home: Other HEMO outpatient | 74 | Renal Dialysis | Exempt from member copayment | |
| 0830 | Peritoneal OPD/Home | 74 | Renal Dialysis | Exempt from member copayment | |
| 0831 | Peritoneal/Composite or Other Rate | 74 | Renal Dialysis | Exempt from member copayment | |
| 0840 | CAPD OPD/Home | 999 | Excluded | Exempt from member copayment | Noncovered revenue codes |
| 0841 | CAPD OPD/Home: CAPD comp or other rate | 999 | Excluded | Exempt from member copayment | Noncovered revenue codes |
| 0842 | Home supplies | 999 | Excluded | Exempt from member copayment | Noncovered revenue codes |
| 0845 | Support Services | 74 | Renal Dialysis | Exempt from member copayment | |
| 0851 | CCPD/Composite or Other Rate | 74 | Renal Dialysis | Exempt from member copayment | |
| 0880 | Miscellaneous Dialysis | 74 | Renal Dialysis | | |
| 0881 0889 | Miscellaneous Dialysis: Ultrafiltration Miscellaneous Dialysis: Other misc dialysis | 74 74 | Renal Dialysis Renal Dialysis | | |
| 0889 | RESERVED | 999 | Excluded | | Noncovered revenue codes |
| 0390 | Psychiatric/Psychological Trt | 76 | Other Ancillary Services | | Noncovered revenue codes |
| 0901 | 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 | | |
| 0909 | RESERVED | 999 | Excluded | | |
| 0910 | RESERVED | 999 | Excluded | | |
| 0911 | Psychiatric/Psychological Svcs: Rehabilitation | 76 | Other Ancillary Services | | |
| 0912 | Psychiatric/Psychological Svcs: Partial Hosp - less intensive | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0913 | Psychiatric/Psychological Svcs: Partial Hosp - Intensive | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0914 | Psychiatric/Psychological Svcs: Individual therapy | 76 | Other Ancillary Services | | |
| 0915 0916 | Psychiatric/Psychological Svcs: Group therapy Psychiatric/Psychological Svcs: Family therapy | 76 76 | Other Ancillary Services Other Ancillary Services | | |
| | Psychiatric/Psychological Svcs: Painty inerapy Psychiatric/Psychological Svcs: Biofeedback | 76 | Other Ancillary Services | | |
| 0918 | 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 | | |
| 0922 | Other Diagnostic Services: Electromyelogram | 76 | Other Ancillary Services | | |
| 0923 | Other Diagnostic Services: Pap smear | 76 | Other Ancillary Services | | |
| 0924 | Other Diagnostic Services: Allergy test | 76 | Other Ancillary Services | | |
| 0925 | Other Diagnostic Services: Pregnancy test | 76 | Other Ancillary Services | | |
| 0929 | Other Diagnostic Services: Other diagnostic services | 76 | Other Ancillary Services | | |
| 0930 | Medical Rehabilitation Day Program | 76 | Other Ancillary Services | | |
| 0940 | Other Therapeutic Serv | 76 | Other Ancillary Services | | Noncovered revenue codes for psychiatric hospitals; Noncovered revenue codes for general hospitals billing psychiatric or 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 | Other Therapeutic Serv: Drug rehab | 76 | Other Ancillary Services | | |



| Revenue Code | Revenue Code Description | Cost Center Code CMS 2552-10 | Cost Center Description | Comment | Non-Allowed Per Wisconsin ForwardHealth Policy |
|-----------------|--|--|---|---------|---|
| 0945 | Other Therapeutic Serv: Alcohol rehab | 76 | Other Ancillary Services | | |
| 0946 | Complex medical equipment-Routine | 76 | Other Ancillary Services | | |
| 0947 | Complex medical equipment-Ancillary | 76 76 | Other Ancillary Services | | |
| 0948 | Pulmonary Rehabilitation Other Therapeutic Serv: Additional RX SVS | 76 | Other Ancillary Services Other Ancillary Services | | Noncovered revenue codes for psychiatric hospitals; Noncovered revenue codes for general hospitals billing psychiatric or substance abuse services |
| 0951 | Other therapeutic services-(940x) Athletic training | 999 | Excluded | | Noncovered revenue codes |
| 0960 | Professional fees | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0961 | Psychiatric | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0962 | Ophthalmology | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0963 | Anesthesiologist (MD) | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0964 | Anesthetist (CRNA) | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0969 | Other professional fee | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0971 | Professional fees (096x) Laboratory | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0972 | Professional fees (096x) Radiology-Diagnostic | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0973 | Professional fees (096x) Radiology-Therapeutic | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0974 | Professional fees (096x) Radiology-nuclear medicine | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0975 | Professional fees (096x) Operating room | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0976 | Professional fees (096x) Respiratory Therapy | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0977 | Professional fees (096x) Physical therapy | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0978 | Professional fees (096x) Occupational therapy | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0979 | Professional fees (096x) Speech pathology | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0981 | Professional fees (096x) Emergency room | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0982 | Professional fees (096x) Outpatient services | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0983 | Professional fees (096x) clinic | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0984 | Professional fees (096x) medical social services | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0985 | Professional fees (096x) EKG | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0987 | Professional fees (096x) Hospital visit | 999 | Excluded | | Nonbillable revenue codes for bill type 011X |
| 0988 | Professional fees (096x) Consultation | 999 999 | Excluded Excluded | | Nonbillable revenue codes for bill type 011X |
| 0989 | Private duty nurse Patient convenience items | 999 | Excluded | | Nonbillable revenue codes for bill type 011X Noncovered revenue codes |
| 0990 | Cafeteria/guest tray | 999 | Excluded | | Noncovered revenue codes |
| 0991 | private linen service | 999 | Excluded | | Noncovered revenue codes |
| 0993 | telephone/telegraph | 999 | Excluded | | Noncovered revenue codes |
| 0994 | TV/radio | 999 | Excluded | | Noncovered revenue codes |
| 0995 | Nonpatient room rentals | 999 | Excluded | | Noncovered revenue codes |
| 0996 | Late discharge charge | 999 | Excluded | | Noncovered revenue codes |
| 0997 | admission kits | 999 | Excluded | | Noncovered revenue codes |
| 0998 | Beauty shop/barber | 999 | Excluded | | Noncovered revenue codes |
| 0999 | Other patient convenience item | 999 | Excluded | | Noncovered revenue codes |
| 1000 | Behavioral health accommodations | 999 | Excluded | | |
| 1001 | Residential treatment-psychiatric | 999 | Excluded | | |
| 1002 | residential treatment-chemical dependency | 999 | Excluded | | |
| 1003 | Supervised living | 999 | Excluded | | |
| 1004 | halfway house | 999 | Excluded | | |
| 1005 | group home | 999 | Excluded | | |
| 1006 | RESERVED | 999 | Excluded | | |
| 1007 | RESERVED | 999 | Excluded | | |
| 1008 | RESERVED | 999 | Excluded | | |
| 1009 | RESERVED | 999 | Excluded | | |
| 1222 | RESERVED | 999 | Excluded | | ļ |
| 2100 | Alternative therapy services | 999 | Excluded | | ļ |
| 2101 | acupuncture | 999 | Excluded | | |
| 2102 | acupressure | 999 | Excluded | | |
| 2103 | massage | 999 | Excluded | | |
| 2104 | reflexology | 999 | Excluded | | |
| 2105 | biofeedback | 999 | Excluded | | |
| 2106 | hypnosis | 999 | Excluded | | |
| 2107 | RESERVED | 999 | Excluded | | |
| 2108 | RESERVED | 999 | Excluded | | |
| 2109 | Other alternative therapy services | 999 | Excluded | | |



State of Wisconsin Department of Health Services Division of Medicaid Services RY 2025 Inpatient 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 |
|-----------------|--|--|-------------------------|---------|---|
| 3100 | RESERVED | 999 | Excluded | | |
| 3101 | Adult day care, Medical and social, hourly | 999 | Excluded | | |
| 3102 | Adult day care, social, hourly | 999 | Excluded | | |
| 3103 | Adult day care, medical and social, daily | 999 | Excluded | | |
| 3104 | Adult day care, social, daily | 999 | Excluded | | |
| 3105 | Adult foster care, daily | 999 | Excluded | | |
| 3106 | RESERVED | 999 | Excluded | | |
| 3107 | RESERVED | 999 | Excluded | | |
| 3108 | RESERVED | 999 | Excluded | | |
| 3109 | Other adult care | 999 | Excluded | | |