

CG-UM-001 Services Reviewed Using Medicare NCDs/LCDs

Effective Date: 01/01/2024 Related Policies & Procedures: PHP Authorization Referral Process

Last Revised: 12/28/2023 Replaces: N/A

Summary

Medicare statutes and regulations, including National Coverage Determinations (NCDs) or Local Coverage Determinations (LCDs) established coverage criteria for certain items or services that are available under Traditional Medicare. The NCDs/LCDs are the first guidelines used when review services for medical necessity

Note: The purpose of this document is to identify medical services that may be reviewed using Medicare NCD/LCD criteria. Information that follows uses specific words familiar to medical professionals such as doctors, nurses, psychologists, or dentists.

Medicare	For detailed information, please click here: https://www.cms.gov/medicare-coverage-database/search-
NCDs	nttps://www.cms.gov/medicare-coverage-database/search- results.aspx?keyword=&keywordType=starts&areald=s6&docType=NCD&contractOption=all&sortBy=relevance
ID	Title
100.3	24-Hour Ambulatory Esophageal pH Monitoring
110.19	Abarelix for the Treatment of Prostate Cancer - RETIRED
140.1	Abortion
30.3	Acupuncture
30.3.3	Acupuncture for Chronic Lower Back Pain (cLBP)
30.3.1	Acupuncture for Fibromyalgia
30.3.2	Acupuncture for Osteoarthritis
260.1	Adult Liver Transplantation
280.8	Air-Fluidized Bed
190.25	Alpha-fetoprotein
20.19	Ambulatory Blood Pressure Monitoring
160.22	Ambulatory EEG Monitoring - RETIRED
10.6	Anesthesia in Cardiac Pacemaker Surgery
110.17	Anti-Cancer Chemotherapy for Colorectal Cancer
110.3	Anti-Inhibitor Coagulant Complex (AICC)
110.9	Antigens Prepared for Sublingual Administration
110.14	Apheresis (Therapeutic Pheresis)
110.18	Aprepitant for Chemotherapy-Induced Emesis
150.9	Arthroscopic Lavage and Arthroscopic Debridement for the Osteoarthritic Knee
20.9	Artificial Hearts and Related Devices - RETIRED
160.7.1	Assessing Patient's Suitability for Electrical Nerve Stimulation Therapy
10.5	Autogenous Epidural Blood Graft
110.22	Autologous Cellular Immunotherapy Treatment
100.1	Bariatric Surgery for Treatment of Co-Morbid Conditions Related to Morbid Obesity
20.31.3	Benson-Henry Institute Cardiac Wellness Program
220.6.20	Beta Amyloid Positron Tomography in Dementia and Neurodegenerative Disease (RETIRED)
30.1	Biofeedback Therapy
30.1.1	Biofeedback Therapy for the Treatment of Urinary Incontinence
230.16	Bladder Stimulators (Pacemakers)
110.20	Blood Brain Barrier Osmotic Disruption for Treatment of Brain Tumors
190.15	Blood Counts
190.20	Blood Glucose Testing
110.8	Blood Platelet Transfusions
110.7	Blood Transfusions Blood Derived Products for Chronic Non-Healing Wounds
270.3 150.3	Blood-Derived Products for Chronic Non-Healing Wounds Rope (Mineral) Density Studies
140.2	Bone (Mineral) Density Studies Breast Reconstruction Following Mastectomy
190.26	Carcinoembryonic Antigen
20.25	Cardiac Catheterization Performed in Other than a Hospital Setting - RETIRED
20.16	Cardiac Output Monitoring by Thoracic Electrical Bioimpedance (TEB)
20.10	Cardiac Pacemaker Evaluation Services
20.8	Cardiac Pacemakers
20.8.3	Cardiac Pacemakers: Single Chamber and Dual Chamber Permanent Cardiac Pacemakers
20.10	Cardiac Rehabilitation Programs - RETIRED
20.10.1	Cardiac Rehabilitation Programs for Chronic Heart Failure
20.27	Cardiointegram (CIG) as an Alternative to Stress Test or Thallium Stress Test
20.18	Carotid Body Resection/Carotid Body Denervation
160.6	Carotid Sinus Nerve Stimulator - RETIRED
160.26	Cavernous Nerves by Electrical Stimulation with Penile Plethsmography
30.8	Cellular Therapy

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Medicare NCDs	https://www.cms.gov/medicare-coverage-database/search-
NCDS	results.aspx?keyword=&keywordType=starts&areald=s6&docType=NCD&contractOption=all&sortBy=relevance
ID	Title
110.2	Certain Drugs Distributed by the National Cancer Institute
110.12	Challenge Ingestion Food Testing
20.21	Chelation Therapy for Treatment of Atherosclerosis
130.3	Chemical Aversion Therapy for Treatment of Alcoholism
110.24	Chimeric Antigen Receptor (CAR) T-cell Therapy
40.3	Closed-Loop Blood Glucose Control Device (CBGCD)
50.3	Cochlear Implantation
50.7	Cochleostomy with Neurovascular Transplant for Meniere's Disease
190.19	Collagen Crosslinks, any Method
150.12	Collagen Meniscus Implant
100.7	Colonic Irrigation
210.3	Colorectal Cancer Screening Tests
220.1	Computed Tomography
80.9	Computer Enhanced Perimetry
70.2	Consultation Services Rendered by a Podiatrist in a Skilled Nursing Facility
70.1	Consultations with a Beneficiary's Family and Associates
240.4	Continuous Positive Airway Pressure (CPAP) Therapy For Obstructive Sleep Apnea (OSA)
280.11 210.4.1	Corset Used as Hernia Support Counseling to Prevent Tobacco Use
230.9	Cryosurgery of Prostate
190.3	Cytogenetic Studies
110.13	Cytotoxic Food Tests
160.24	Deep Brain Stimulation for Essential Tremor and Parkinson's Disease
260.6	Dental Examination Prior to Kidney Transplantation
250.5	Dermal Injections for the Treatment of Facial Lipodystrophy Syndrome (LDS)
40.1	Diabetes Outpatient Self-Management Training
230.4	Diagnosis and Treatment of Impotence
100.5	Diagnostic Breath Analyses
20.12	Diagnostic Endocardial Electrical Stimulation (Pacing)
190.2	Diagnostic Pap Smears
230.11	Diagnostic Pap Smears - RETIRED
150.5	Diathermy Treatment
220.9	Digital Subtraction Angiography
190.24	Digoxin Therapeutic Drug Assay
230.12	Dimethyl Sulfoxide (DMSO)
20.24	Displacement Cardiography
280.1	Durable Medical Equipment Reference List
130.4	Electrical Aversion Therapy for Treatment of Alcoholism
230.15	Electrical Continence Aid
160.7	Electrical Nerve Stimulators
270.1	Electrical Stimulation (ES) and Electromagnetic Therapy for the Treatment of Wounds
20.15	Electrocardiographic Services
160.8 190.4	Electroencephalographic Monitoring During Surgical Procedures Involving the Cerebral Vasculature Electron Microscope - RETIRED
160.9	Electron Microscope - RETIRED Electronecephalographic (EEG) Monitoring During Open-Heart Surgery - RETIRED
50.2	Electronic Speech Aids
30.4	Electrosleep Therapy - RETIRED
160.15	Electrotherapy for Treatment of Facial Nerve Paralysis (Bell's Palsy)
100.13	Endoscopy
80.8	Endothelial Cell Photography
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NCDs	results.aspx?keyword=&keywordType=starts&areald=s6&docType=NCD&contractOption=all&sortBy=relevance
ID	Title
180.2	Enteral and Parenteral Nutritional Therapy - RETIRED
110.21	Erythropoiesis Stimulating Agents (ESAs) in Cancer and Related Neoplastic Conditions
100.4	Esophageal Manometry
20.22	Ethylenediamine-Tetra-Acetic (EDTA) Chelation Therapy for Treatment of Atherosclerosis
160.10	Evoked Response Tests
20.20	External Counterpulsation (ECP) Therapy for Severe Angina
20.5	Extracorporeal Immunoadsorption (ECI) Using Protein A Columns (RETIRED)
110.4	Extracorporeal Photopheresis
20.2	Extracranial-Intracranial (EC-IC) Arterial Bypass Surgery
20.23	Fabric Wrapping of Abdominal Aneurysms
220.6.15	FDG PET for All Other Cancer Indications Not Previously Specified (Replaced with Section 220.6.17) - RETIRED
220.6.14	FDG PET for Brain, Cervical, Ovarian, Pancreatic, Small Cell Lung, and Testicular Cancers (Replaced with Section 220.6.17) - RETIRED
220.6.10	FDG PET for Breast Cancer (Replaced with Section 220.6.17) - RETIRED
220.6.4	FDG PET for Colorectal Cancer (Replaced with Section 220.6.17) - RETIRED
220.6.13	FDG PET for Dementia and Neurodegenerative Diseases
220.6.3	FDG PET for Esophageal Cancer (Replaced with Section 220.6.17) - RETIRED
220.6.7	FDG PET for Head and Neck Cancers (Replaced with Section 220.6.17) - RETIRED
220.6.16	FDG PET for Infection and Inflammation - RETIRED
220.6.2	FDG PET for Lung Cancer (Replaced with Section 220.6.17) - RETIRED
220.6.5	FDG PET for Lymphoma (Replaced with Section 220.6.17) - RETIRED
220.6.6	FDG PET for Melanoma (Replaced with Section 220.6.17) - RETIRED
220.6.8	FDG PET for Myocardial Viability
220.6.9	FDG PET for Refractory Seizures
220.6.12	FDG PET for Soft Tissue Sarcoma (Replaced with Section 220.6.17) - RETIRED
220.6.11	FDG PET for Thyroid Cancer (Replaced with Section 220.6.17) - RETIRED
190.34	Fecal Occult Blood Test
150.8	Fluidized Therapy Dry Heat for Certain Musculoskeletal Disorders
110.11	Food Allergy Testing and Treatment
190.32	Gamma Glutamyl Transferase
100.11	Gastric Balloon for Treatment of Obesity - RETIRED
100.6	Gastric Freezing
100.12 140.9	Gastrophotography Condor Dyophoria and Condor Recognizament Surgery
190.21	Gender Dysphoria and Gender Reassignment Surgery Glycated Hemoglobin/Glycated Protein
110.5	Granulocyte Transfusions
230.5	Gravlee Jet Washer
190.6	Hair Analysis
260.9	Heart Transplants
260.10	Heartsbreath Test for Heart Transplant Rejection
240.3	Heat Treatment, Including the Use of Diathermy and Ultra-Sound for Pulmonary Conditions
130.8	Hemodialysis for Treatment of Schizophrenia
250.2	Hemorheograph
190.33	Hepatitis Panel/Acute Hepatitis Panel
20.13	HIS Bundle Study
190.1	Histocompatibility Testing
40.2	Home Blood Glucose Monitors
290.2	Home Health Nurses' Visits to Patients Requiring Heparin Injection
290.1	Home Health Visits to a Blind Diabetic

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NCDs	results.aspx?keyword=&keywordType=starts&areald=s6&docType=NCD&contractOption=all&sortBy=relevance
ID	Title
240.2.2	Home Oxygen Use to Treat Cluster Headache (CH) - RETIRED
	Home Prothrombin Time/International Normalized Ratio (PT/INR) Monitoring for Anticoagulation
190.11	Management
240.2	Home Use of Oxygen
240.2.1	Home Use of Oxygen in Approved Clinical Trials
70.5	Hospital and Skilled Nursing Facility Admission Diagnostic Procedures
280.7	Hospital Beds
190.27	Human Chorionic Gonadotropin
190.14	Human Immunodeficiency Virus (HIV) Testing (Diagnosis)
190.13	Human Immunodeficiency Virus (HIV) Testing (Prognosis Including Monitoring)
190.7	Human Tumor Stem Cell Drug Sensitivity Assays
80.1	Hydrophilic Contact Lens For Corneal Bandage
80.4	Hydrophilic Contact Lenses
20.29	Hyperbaric Oxygen Therapy
110.1	Hyperthermia for Treatment of Cancer
20.4	Implantable Cardioverter Defibrillators (ICDs)
100.9	Implantation of Anti-Gastroesophageal Reflux Device - RETIRED
230.10	Incontinence Control Devices
280.15	INDEPENDENCE iBOT 4000 Mobility System
160.1	Induced Lesions of Nerve Tracts
270.6	Infrared Therapy Devices
280.14	Infusion Pumps
100.10	Injection Sclerotherapy for Esophageal Variceal Bleeding
10.3	Inpatient Hospital Pain Rehabilitation Programs
130.1	Inpatient Hospital Stays for Treatment of Alcoholism
170.1	Institutional and Home Care Patient Education Programs
40.4	Insulin Syringe
210.11	Intensive Behavioral Therapy for Cardiovascular Disease
210.12	Intensive Behavioral Therapy for Obesity
20.31	Intensive Cardiac Rehabilitation (ICR) Programs
260.5	Intestinal and Multi-Visceral Transplantation
100.8	Intestinal Bypass Surgery - RETIRED
80.12	Intraocular Lenses (IOLs)
80.6 20.11	Intraocular Photography Intraoperative Ventricular Mapping
240.5	Intraoperative ventricular Mapping Intrapulmonary Percussive Ventilator (IPV)
30.6	Intravenous Histamine Therapy
250.3	Intravenous Immune Globulin for the Treatment of Autoimmune Mucocutaneous Blistering Diseases
110.10	Intravenous Iron Therapy
160.14	Invasive Intracranial Pressure Monitoring
260.3.1	Islet Cell Transplantation in the Context of a Clinical Trial
160.17	L-Dopa
190.10	Laboratory Tests - CRD Patients
30.7	Laetrile and Related Substances
100.13	Laparoscopic Cholecystectomy
140.5	Laser Procedures
20.8.4	Leadless Pacemakers
230.19	Levocarnitine for use in the Treatment of Carnitine Deficiency in ESRD Patients
190.23	Lipid Testing
150.10	Lumbar Artificial Disc Replacement (LADR)

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NCDs	results.aspx?keyword=&keywordType=starts&areald=s6&docType=NCD&contractOption=all&sortBy=relevance
ID	Title
210.14	Lung Cancer Screening with Low Dose Computed Tomography (LDCT)
240.1	Lung Volume Reduction Surgery (Reduction Pneumoplasty)
260.7	Lymphocyte Immune Globulin, Anti-Thymocyte Globulin (Equine)
190.8	Lymphocyte Mitogen Response Assays
220.3	Magnetic Resonance Angiography - RETIRED
220.2	Magnetic Resonance Imaging
220.2.1	Magnetic Resonance Spectroscopy - RETIRED
220.4	Mammograms
150.1	Manipulation
180.1	Medical Nutrition Therapy
170.2	Melodic Intonation Therapy
20.30	Microvolt T-Wave Alternans (MTWA)
280.3	Mobility Assistive Equipment (MAE)
200.3	Monoclonal Antibodies Directed Against Amyloid for the Treatment of Alzheimer's Disease (AD)
160.25	Multiple Electroconvulsive Therapy (MECT)
200.2	Nebulized Beta Adrenergic Agonist Therapy for Lung Diseases
200.1	Nesiritide for Treatment of Heart Failure Patients
160.12	Neuromuscular Electrical Stimulation (NMES)
90.2	Next Generation Sequencing (NGS)
230.8	Non-Implantable Pelvic Floor Electrical Stimulator
270.2	Noncontact Normothermic Wound Therapy (NNWT)
20.17	Noninvasive Tests of Carotid Function
110.16	Nonselective (Random) Transfusions and Living Related Donor Specific Transfusions (DST) in Kidney
110.10	Transplantation
220.8	Nuclear Radiology Procedure - RETIRED
300.1	Obsolete or Unreliable Diagnostic Tests
80.2.1	Ocular Photodynamic Therapy (OPT)
20.31.2	Ornish Program for Reversing Heart Disease
150.2	Osteogenic Stimulators
10.4	Outpatient Hospital Pain Rehabilitation Programs
130.2	Outpatient Hospital Services for Treatment of Alcoholism
40.7	Outpatient Intravenous Insulin Treatment
50.5	Oxygen Treatment of Inner Ear/Carbon Therapy
260.3	Pancreas Transplants
190.16	Partial ThromboplastinTime (PTT)
20.26	Partial Ventriculectomy
260.2	Pediatric Liver Transplantation
220.13	Percutaneous Image-Guided Breast Biopsy
150.13	Percutaneous Image-Guided Lumbar Decompression for Lumbar Spinal Stenosis
20.34	Percutaneous Left Atrial Appendage Closure (LAAC)
20.7	Percutaneous Transluminal Angioplasty (PTA)
230.13 220.6.1	Peridex CAPD Filter Set PET for Perfusion of the Heart
80.10	Phaco-Emulsification Procedure - Cataract Extraction
90.1	Pharmacogenomic Testing for Warfarin Response
80.2	Photodynamic Therapy
80.3	Photosensitive Drugs
160.19	Phrenic Nerve Stimulator
	Physician's Office within an Institution Coverage of Services and Supplies Incident to a Physician's
70.3	Services

Medicare	For detailed information, please click here: https://www.cms.gov/medicare-coverage-database/search-
NCDs	results.aspx?keyword=&keywordType=starts&areald=s6&docType=NCD&contractOption=all&sortBy=relevance
ID	Title
140.4	Plastic Surgery to Correct "Moon Face"
20.14	Plethysmography
280.6	Pneumatic Compression Devices
270.5	Porcine Skin and Gradient Pressure Dressings
220.10	Portable Hand-Held X-Ray Instrument
220.6.17	Positron Emission Tomography (FDG) for Oncologic Conditions
220.6.19	Positron Emission Tomography (NaF-18) to Identify Bone Metastasis of Cancer
220.6	Positron Emission Tomography (PET) Scans - RETIRED
240.7	Postural Drainage Procedures and Pulmonary Exercises
150.7	Prolotherapy, Joint Sclerotherapy, and Ligamentous Injections with Sclerosing Agents
70.4	Pronouncement of Death
210.1	Prostate Cancer Screening Tests
190.31	Prostate Specific Antigen
280.10	Prosthetic Shoe
190.17	Prothrombin Time (PT)
240.8	Pulmonary Rehabilitation Services
80.7	Refractive Keratoplasty
310.1	Routine Costs in Clinical Trials
230.18	Sacral Nerve Stimulation For Urinary Incontinence
110.6	Scalp Hypothermia During Chemotherapy to Prevent Hair Loss
80.5	Scleral Shell
210.8	Screening and Behavioral Counseling Interventions in Primary Care to Reduce Alcohol Misuse
210.2.1	Screening for Cervical Cancer with Human Papillomavirus (HPV)
210.9	Screening for Depression in Adults
210.6	Screening for Hepatitis B Virus (HBV) Infection
210.13	Screening for Hepatitis C Virus (HCV) in Adults
210.10	Screening for Sexually Transmitted Infections (STIs) and High-Intensity Behavioral Counseling (HIBC) to Prevent STIs
210.7	Screening for the Human Immunodeficiency Virus (HIV) Infection
210.2	Screening Pap Smears and Pelvic Examinations for Early Detection of Cervical or Vaginal Cancer
280.16	Seat Elevation Equipment (Power Operated) on Power Wheelchairs
280.4	Seat Lift
20.8.2	Self-Contained Pacemaker Monitors
160.23	Sensory Nerve Conduction Threshold Tests (sNCTs)
190.9	Serologic Testing for Acquired Immunodeficiency Syndrome (AIDS)
190.18	Serum Iron Studies
70.2.1	Services Provided for the Diagnosis and Treatment of Diabetic Sensory Neuropathy with Loss of
70.2.1	Protective Sensation (aka Diabetic Peripheral Neuropathy)
220.12	Single Photon Emission Computed Tomography (SPECT)
240.4.1	Sleep Testing for Obstructive Sleep Apnea (OSA)
210.4	Smoking and Tobacco-Use Cessation Counseling - RETIRED
50.1	Speech Generating Devices
170.3	Speech-Language Pathology Services for the Treatment of Dysphagia
110.23	Stem Cell Transplantation (Formerly 110.8.1)
160.4	Stereotactic Cingulotomy as a Means of Psychosurgery - RETIRED
160.5	Stereotaxic Depth Electrode Implantation
230.3	Sterilization (OFT) (OFT
20.35	Supervised Exercise Therapy (SET) for Symptomatic Peripheral Artery Disease (PAD)
160.13	Supplies Used in the Delivery of Transcutaneous Electrical Nerve Stimulation (TENS) and Neuromuscular Electrical Stimulation (NMES)

Medicare	For detailed information, please click here:
NCDs	https://www.cms.gov/medicare-coverage-database/search- results.aspx?keyword=&keywordType=starts&areald=s6&docType=NCD&contractOption=all&sortBy=relevance
ID	Title
100.14	Surgery for Diabetes - RETIRED
140.7	Surgical or Other Invasive Procedure Performed on the Wrong Body Part
140.8	Surgical or Other Invasive Procedure Performed on the Wrong Patient
190.5	Sweat Test
280.12	Sykes Hernia Control
160.21	Telephone Transmission of EEGs
20.31.1	The Pritikin Program
20.28	Therapeutic Embolization
150.11	Thermal Intradiscal Procedures (TIPs)
30.2	Thermogenic Therapy
220.11	Thermography
20.3	Thoracic Duct Drainage (TDD) in Renal Transplants
190.22	Thyroid Testing
50.6	Tinnitus Masking - RETIRED
50.4	Tracheostomy Speaking Valve
20.32	Transcatheter Aortic Valve Replacement (TAVR)
20.33	Transcatheter Edge-to-Edge Repair (TEER) for Mitral Valve Regurgitation
30.5	Transcendental Meditation
10.2	Transcutaneous Electrical Nerve Stimulation (TENS) for Acute Post-Operative Pain
160.27	Transcutaneous Electrical Nerve Stimulation (TENS) for Chronic Low Back Pain (CLBP)
280.13	Transcutaneous Electrical Nerve Stimulators (TENS) - RETIRED
160.20	Transfer Factor for Treatment of Multiple Sclerosis
30.9	Transillumination Light Scanning or Diaphanography
20.6	Transmyocardial Revascularization (TMR)
20.8.1.1	Transtelephonic Monitoring of Cardiac Pacemakers
240.6	Transvenous (Catheter) Pulmonary Embolectomy (TPE) - RETIRED
250.4	Treatment of Actinic Keratosis
130.5	Treatment of Alcoholism and Drug Abuse in a Freestanding Clinic
270.4	Treatment of Decubitus Ulcers
130.6	Treatment of Drug Abuse (Chemical Dependency)
230.1	Treatment of Kidney Stones Treatment of Motor Function Disorders with Electric Nerve Stimulation
160.2 40.5	
250.1	Treatment of Obesity Treatment of Psoriasis
190.28	Tumor Antigen by Immunoassay - CA 125
190.28	Tumor Antigen by Immunoassay - CA 123 Tumor Antigen by Immunoassay - CA 15-3/CA 27.29
190.29	Tumor Antigen by Immunoassay - CA 19-9
230.14	Ultrafiltration Monitor
110.15	Ultrafiltration, Hemoperfusion and Hemofiltration
50.8	Ultrasonic Surgery
220.5	Ultrasound Diagnostic Procedures
230.17	Urinary Drainage Bags
190.12	Urine Culture, Bacterial
230.2	Uroflowmetric Evaluations
10.1	Use of Visual Tests Prior to and General Anesthesia during Cataract Surgery
230.6	Vabra Aspirator
160.18	Vagus Nerve Stimulation (VNS)
20.9.1	Ventricular Assist Devices
20.1	Vertebral Artery Surgery
160.16	Vertebral Axial Decompression (VAX-D)

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ID	Title
80.3.1	Verteporfin
150.6	Vitamin B12 Injections to Strengthen Tendons, Ligaments, etc., of the Foot
80.11	Vitrectomy
230.7	Water Purification and Softening Systems Used in Conjunction with Home Dialysis
280.2	White Cane for Use by a Blind Person
130.7	Withdrawal Treatments for Narcotic Addictions
140.6	Wrong Surgical or Other Invasive Procedure Performed on a Patient
220.7	Xenon Scan - RETIRED

Medicare LCDs	For detailed information, please click here:
(California MAC)	https://www.cms.gov/medicare-coverage-database/reports/local-coverage-final-lcds-state-
ID	report.aspx?stateRegion=s6&contractorNumber=all&lcdStatus=all
L36408	Allergy Immunotherapy
L34313	Allergy Testing
L36402	Allergy Testing Allergy Testing
L39396	Allogeneic Hematopoietic Cell Transplantation for Primary Refractory or Relapsed Hodgkin's and
	Non-Hodgkin's Lymphoma with B-cell or T-cell Origin
L39477	Allogeneic Hematopoietic Cell Transplantation for Primary Refractory or Relapsed Hodgkin's and Non-Hodgkin's Lymphoma with B-cell or T-cell Origin
L39624	Amniotic and Placental Derived Product Injections and/or Applications for Musculoskeletal
(Notice Ended	Indications, Non-Wound
11/11/2023)	Indications, Non-Wound
L39116	Amniotic and Placental-Derived Product Injections and/or Applications for Musculoskeletal
(Notice Ended	Indications, Non-Wound
11/11/2023)	indications, Non-would
L33686	Ankle-Foot/Knee-Ankle-Foot Orthosis
L33690	Automatic External Defibrillators
L35124	Autonomic Function Testing
L35526	B-type Natriuretic Peptide (BNP) Testing
L37054	BDX-XL2
L37216	BDX-XL2
L34233	Benign Skin Lesion Removal (Excludes Actinic Keratosis, and Mohs)
L34648	Bisphosphonate Drug Therapy
L34648	
(Notice Ends	Bisphosphonate Drug Therapy
02/10/2024)	
L34528	Blepharoplasty, Blepharoptosis and Brow Lift
L34194	Blepharoplasty, Eyelid Surgery, and Brow Lift
L34635	Botulinum Toxin Type A & Type B
L35170	Botulinum Toxin Types A and B Policy
L36267	Bowel Management Devices
L33733	Canes and Crutches
L34324	Cardiovascular Stress Testing, Including Exercise and/or Pharmacological Stress and Stress Echocardiography
L39716	Conocardiography
(Notice Ends	Cataract Extraction
02/10/2024)	
L34203	Cataract Surgery in Adults
L35490	Category III Codes
L33823	Cervical Traction Devices
L37205	Chemotherapy Drugs and their Adjuncts
L37547	Chest X-Ray Policy
L33735	Cold Therapy
L38824	Colon Capsule Endoscopy (CCE)
L38837	Colon Capsule Endoscopy (CCE)
L34614	Colonoscopy and Sigmoidoscopy-Diagnostic
L33736	Commodes
L38709	Computed Tomography Cerebral Perfusion Analysis (CTP)
L38211	Corneal Hysteresis
L35121	Coronary Computed Tomography Angiography (CCTA)
L39051	Cosmetic and Reconstructive Surgery
L34213	Diagnostic and Therapeutic Colonoscopy
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Medicare LCDs	For detailed information, please click here:
(California MAC)	https://www.cms.gov/medicare-coverage-database/reports/local-coverage-final-lcds-state-
	report.aspx?stateRegion=s6&contractorNumber=all&lcdStatus=all_
ID LOADAT	Title
	Electrocardiograms
L34636	Electrocardiographic (EKG or ECG) Monitoring (Holter or Real-Time Monitoring)
L34659	Endoscopic Treatment of GERD
L38955	Enteral Nutrition
L38955	Enteral Nutrition
	Epidural Steroid Injections for Pain Management
	Epidural Steroid Injections for Pain Management
L34633	Erythropoiesis Stimulating Agents (ESAs)
	External Breast Prostheses
L33317	External Breast Prostheses
L33794	External Infusion Pumps
	External Infusion Pumps
	Eye Prostheses
	Facet Joint Interventions for Pain Management
L38841	Facet Joint Interventions for Pain Management
-	Facial Prostheses
L37502	Frequency of Hemodialysis
	Frequency of Hemodialysis
L33822	Glucose Monitors
L33822	Glucose Monitors
L36864	GlycoMark® Testing for Glycemic Control
L33784	Heating Pads and Heat Lamps
L33785	High Frequency Chest Wall Oscillation Devices
L33393	Hospice - Determining Terminal Status
L33820	Hospital Beds And Accessories
L38310	Hypoglossal Nerve Stimulation for the Treatment of Obstructive Sleep Apnea
	Hypoglossal Nerve Stimulation for the Treatment of Obstructive Sleep Apnea
L34314	Immune Globulin Intravenous (IVIg)
L34771	Immune Globulins
L34596	Immunizations
L33824	Immunosuppressive Drugs
L33824	Immunosuppressive Drugs
L38657	Implantable Continuous Glucose Monitors (I-CGM)
L38686	Implantable Continuous Glucose Monitors (I-CGM)
L37628	In Vitro Chemosensitivity & Chemoresistance Assays
L33825	Infrared Heating Pad Systems
L34218	Injections - Tendon, Ligament, Ganglion Cyst, Tunnel Syndromes and Morton's Neuroma
L39529	Intraarticular Knee Injections of Hyaluronan
L34623	Intraoperative Neurophysiological Testing
L39642	
(Notice Ends	Intraosseous Basivertebral Nerve Ablation
01/27/2024)	
L33786	Intrapulmonary Percussive Ventilation System
L33610	Intravenous Immune Globulin
L33610	Intravenous Immune Globulin
L33318	Knee Orthoses
L36678	Lab: Bladder/Urothelial Tumor Markers
L37066	Lab: Coenzyme Q10 (CoQ10)
L37616	Lab: Cystatin C Measurement
	Lab: Flow Cytometry
L34215	Lab. How Oylometry

Medicare LCDs	For detailed information, please click here:
(California MAC)	https://www.cms.gov/medicare-coverage-database/reports/local-coverage-final-lcds-state-
	report.aspx?stateRegion=s6&contractorNumber=all&lcdStatus=all_
ID	Title
L36805	Lab: Special Histochemical Stains and Immunohistochemical Stains
L33787	Lower Limb Prostheses
L33787	Lower Limb Prostheses
L34220	Lumbar MRI
L37729	Magnetic-Resonance-Guided Focused Ultrasound Surgery (MRgFUS) for Essential Tremor and
	Tremor Dominant Parkinson's Disease
L33788	Manual Wheelchair Bases
L37620	MDS FISH
L37772	MDS FISH
L36846	Measurement of Salivary Hormones
L33795	Mechanical In-exsufflation Devices
L38299	Micro-Invasive Glaucoma Surgery (MIGS)
L39620	
(Notice Ends	Micro-Invasive Glaucoma Surgery (MIGS)
01/28/2024)	
L35702	Mohs Micrographic Surgery
L35494	Mohs Micrographic Surgery
L38355	MolDX: AlloSure® or Equivalent Cell-Free DNA Testing for Kidney and Heart Allografts
L36358	MolDX: Biomarkers in Cardiovascular Risk Assessment
L36523	MolDX: Biomarkers in Cardiovascular Risk Assessment
L38331	MolDX: Blood Product Molecular Antigen Typing
L38441	MolDX: Blood Product Molecular Antigen Typing
L36380	MolDX: Breast Cancer Assay: Prosigna®
L36811	MolDX: Breast Cancer Assay: Prosigna®
L37822	MoIDX: Breast Cancer Index® (BCI) Gene Expression Test
L37913	MoIDX: Breast Cancer Index® (BCI) Gene Expression Test
L37210	MoIDX: Decision Dx-UM (Uveal Melanoma)
L37070	MolDX: DecisionDx-UM (Uveal Melanoma)
L37295	MolDX: EndoPredict® Breast Cancer Gene Expression Test
L37663	MoIDX: EndoPredict® Breast Cancer Gene Expression Test
L37887	MolDX: Envisia™, Veracyte™, Idiopathic Pulmonary Fibrosis Diagnostic Test
L37919	MolDX: Envisia™, Veracyte™, Idiopathic Pulmonary Fibrosis Diagnostic Test
L36180	MoIDX: Genetic Testing for BCR-ABL Negative Myeloproliferative Disease
L36815	MoIDX: Genetic Testing for BCR-ABL Negative Myeloproliferative Disease
L36155	MolDX: Genetic Testing for Hypercoagulability / Thrombophilia (Factor V Leiden, Factor II Prothrombin, and MTHFR)
L36400	MoIDX: Genetic Testing for Hypercoagulability/Thrombophilia (Factor V Leiden, Factor II Prothrombin, and MTHFR)
L36551	MoIDX: HLA-DQB1*06:02 Testing for Narcolepsy
L37003	MoIDX: FILA-DQB1 00:02 Testing for Narcolepsy MoIDX: HLA-DQB1*06:02 Testing for Narcolepsy
L37897	MoIDX: FileA-DQBT 00:02 Testing for Narcolepsy MoIDX: Inivata™, InVisionFirst®, Liquid Biopsy for Patients with Lung Cancer
L37921	MolDX: Inivata™, InVisionFirst®, Liquid Biopsy for Patients with Lung Cancer
L38972	MolDX: Lab-Developed Tests for Inherited Cancer Syndromes in Patients with Cancer
L39040	MoIDX: Lab-Developed Tests for Inherited Cancer Syndromes in Patients with Cancer
L37750	MolDX: Melanoma Risk Stratification Molecular Testing
L38018	MolDX: Melanoma Risk Stratification Molecular Testing
L36188	U
L37001	MoIDX: MGMT Promoter Methylation Analysis
	MoIDX: MGMT Promoter Methylation Analysis
L38814	MoIDX: Minimal Residual Disease Testing for Cancer
L38835	MoIDX: Minimal Residual Disease Testing for Cancer
L39373	MolDX: Molecular Assays for the Diagnosis of Cutaneous Melanoma

Medicare LCDs	For detailed information, please click here:
(California MAC)	https://www.cms.gov/medicare-coverage-database/reports/local-coverage-final-lcds-state-
	report.aspx?stateRegion=s6&contractorNumber=all&lcdStatus=all_
ID	Title
L39479	MolDX: Molecular Assays for the Diagnosis of Cutaneous Melanoma
L39467	
(Notice Ended	MolDX: Molecular Biomarker Testing to Guide Targeted Therapy Selection in Rheumatoid Arthritis
10/14/2023)	
L39481	
(Notice Ended	MolDX: Molecular Biomarker Testing to Guide Targeted Therapy Selection in Rheumatoid Arthritis
10/14/2023)	
L39005	MolDX: Molecular Biomarkers to Risk-Stratify Patients at Increased Risk for Prostate Cancer
L39042	MolDX: Molecular Biomarkers to Risk-Stratify Patients at Increased Risk for Prostate Cancer
L35160	MolDX: Molecular Diagnostic Tests (MDT)
L36807	MolDX: Molecular Diagnostic Tests (MDT)
L39001	MolDX: Molecular Syndromic Panels for Infectious Disease Pathogen Identification Testing
L39044	MolDX: Molecular Syndromic Panels for Infectious Disease Pathogen Identification Testing
L39262	MolDX: Molecular Testing for Detection of Upper Gastrointestinal Metaplasia, Dysplasia, and
1,00050	Neoplasia
L39356	MolDX: Molecular Testing for Detection of Upper Gastrointestinal Metaplasia, Dysplasia, and
1,00000	Neoplasia
L38680	MolDx: Molecular Testing for Solid Organ Allograft Rejection
L38629	MolDX: Molecular Testing for Solid Organ Allograft Rejection
L37879	MoIDX: myPath® Melanoma Assay
L37923	MolDX: myPath® Melanoma Assay
L38119	MoIDX: Next-Generation Sequencing for Solid Tumors
L38158	MolDX: Next-Generation Sequencing for Solid Tumors
L38123	MolDX: Next-Generation Sequencing Lab-Developed Tests for Myeloid Malignancies and
L38176	Suspected Myeloid Malignancies MelDY: Next Constraint Sequencing Leb Developed Tests for Myeloid Malignancies and
L30170	MolDX: Next-Generation Sequencing Lab-Developed Tests for Myeloid Malignancies and
L36335	Suspected Myeloid Malignancies
L36333	MoIDX: NRAS Genetic Testing MoIDX: NRAS Genetic Testing
L36941	MoIDX: NIVAS Genetic Testing MoIDX: Oncotype DX® Breast Cancer for DCIS (Genomic Health™)
L37199	MoIDX: Oncotype DX® Breast Cancer for DCIS (Genomic Health) MoIDX: Oncotype DX® Breast Cancer for DCIS (Genomic Health™)
L36886	MoIDX: Oncotype DX® Breast Gancer for DGIS (Genomic Fleatin) MoIDX: Percepta© Bronchial Genomic Classifier
L37195	MoIDX: Percepta® Bronchial Genomic Classifier
L38335	MoIDX: Perceptas Brondmar Centrine Glassiner MoIDX: Pharmacogenomics Testing
L38435	MoIDX: Pharmacogenomics Testing MoIDX: Pharmacogenomics Testing
L38643	MoIDX: Phenotypic Biomarker Detection from Circulating Tumor Cells
L38678	MolDX: Phenotypic Biomarker Detection from Circulating Tumor Cells
L38151	MoIDX: Prigmented Lesion Assay
L38178	MolDX: Pigmented Lesion Assay
L39230	MolDX: Plasma-Based Genomic Profiling in Solid Tumors
L38168	MolDX: Plasma-Based Genomic Profiling in Solid Tumors
L38327	MolDX: Predictive Classifiers for Early Stage Non-Small Cell Lung Cancer
L38443	MolDX: Predictive Classifiers for Early Stage Non-Small Cell Lung Cancer
L38647	MolDX: Prognostic and Predictive Molecular Classifiers for Bladder Cancer
L38684	MolDX: Prognostic and Predictive Molecular Classifiers for Bladder Cancer
L37299	MolDX: Prometheus IBD sgi Diagnostic® Policy
L37539	MolDX: Prometheus IBD sgi Diagnostic® Policy
L38339	MolDX: Prostate Cancer Genomic Classifier Assay for Men with Localized Disease
L38433	MolDX: Prostate Cancer Genomic Classifier Assay for Men with Localized Disease
L38351	MolDX: Repeat Germline Testing
L38429	MolDX: Repeat Germline Testing
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	For detailed information, please click here:
Medicare LCDs	https://www.cms.gov/medicare-coverage-database/reports/local-coverage-final-lcds-state-
(California MAC)	report.aspx?stateRegion=s6&contractorNumber=all&lcdStatus=all
ID	Title
L37373	MRI and CT Scans of the Head and Neck
L33370	Nebulizers
L33370	Nebulizers
L33821	Negative Pressure Wound Therapy Pumps
L33821	Negative Pressure Wound Therapy Pumps
L35456	Nerve Blockade for Treatment of Chronic Pain and Neuropathy
L35222	Nerve Blocks for Peripheral Neuropathy
L36524	Nerve Conduction Studies and Electromyography
L34594	Nerve Conduction Studies and Electromyography
L35998	Non-Coronary Vascular Stents
L35755	Non-Invasive Abdominal / Visceral Vascular Studies
L35753	Non-Invasive Cerebrovascular Studies
L38613	Non-Invasive Fractional Flow Reserve (FFR) for Ischemic Heart Disease
L38839	Non-Invasive Fractional Flow Reserve (FFR) for Ischemic Heart Disease
L35761	Non-Invasive Peripheral Arterial Vascular Studies
L35751	Non-Invasive Peripheral Venous Vascular and Hemodialysis Access Studies
L33826	Oral Anticancer Drugs
L33826	Oral Anticancer Drugs
L33827	Oral Antiemetic Drugs (Replacement for Intravenous Antiemetics)
L33827	Oral Antiemetic Drugs (Replacement for Intravenous Antiemetics)
L33611	Oral Appliances for Obstructive Sleep Apnea
L33641	Orthopedic Footwear
L33796	Osteogenesis Stimulators
L33796	Osteogenesis Stimulators
L33828	Ostomy Supplies
L33828	Ostomy Supplies
L33797	Oxygen and Oxygen Equipment
L38953	Parenteral Nutrition
L38953 L33799	Parenteral Nutrition
L35486	Patient Lifts Polyio Floor Dysfunction: Approach Managery and FMC
	Pelvic Floor Dysfunction: Anorectal Manometry and EMG
L34761 L36000	Percutaneous Coronary Interventions Percutaneous minimally invasive fusion/stabilization of the sacroiliac joint for the treatment of back
L30000	pain
L34228	Percutaneous Vertebral Augmentation (PVA) for Osteoporotic Vertebral Compression Fracture
L34220	(VCF)
L38213	Percutaneous Vertebral Augmentation (PVA) for Vertebral Compression Fracture (VCF)
L34328	Peripheral Nerve Stimulation
L35163	Plastic Surgery
L39058	Platelet Rich Plasma Injections for Non-Wound Injections
	Tatalor Lastin Monta Injudicino for Hori Would Injudicino
	Pneumatic Compression Devices
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	Polysomnography and Other Sleep Studies
L33789	
	1
L33642	
L33692	Pressure Reducing Support Surfaces - Group 3
L33830 L33642	Polysomnography and Other Sleep Studies Polysomnography and Other Sleep Studies Polysomnography and Other Sleep Studies Positive Airway Pressure (PAP) Devices for the Treatment of Obstructive Sleep Apnea Positive Airway Pressure (PAP) Devices for the Treatment of Obstructive Sleep Apnea Power Mobility Devices Pressure Reducing Support Surfaces - Group 1 Pressure Reducing Support Surfaces - Group 2 Pressure Reducing Support Surfaces - Group 3

Medicare LCDs	For detailed information, please click here:
(California MAC)	https://www.cms.gov/medicare-coverage-database/reports/local-coverage-final-lcds-state-
	report.aspx?stateRegion=s6&contractorNumber=all&lcdStatus=all_
ID	Title
L36704	ProMark® Risk Score
L37011	ProMark® Risk Score
L34616	Psychiatry and Psychology Services
L34646 L34247	Psychological and Neuropsychological Testing
	Pulmonary Function Testing Refractive Lenses
L33793	
L35498 L33800	Removal of Benign Skin Lesions
	Respiratory Assist Devices
L33800	Respiratory Assist Devices
L34149	Despiratory Core
(Notice Ended	Respiratory Care
11/04/2023) L39462	Consilies Isint Injections and Dress dures
L39462 L39475	Sacroiliac Joint Injections and Procedures Sacroiliac Joint Injections and Procedures
L34760	,
L33801	Scanning Computerized Ophthalmic Diagnostic Imaging (SCODI) Seat Lift Mechanisms
L36702	
L34624	Serum Magnesium
L33739	Somatosensory Testing
L35136	Speech Generating Devices (SGD) Spinal Cord Stimulators for Chronic Pain
L33790	Spinal Orthoses: TLSO and LSO
L33612	Suction Pumps
L33612	Suction Pumps
L33831	Surgical Dressings
L33831	Surgical Dressings
L34526	Surgical Treatment of Obstructive Sleep Apnea (OSA)
L33369	Therapeutic Shoes for Persons with Diabetes
L34163	Total Hip Arthroplasty
L36575	Total Knee Arthroplasty
L33832	Tracheostomy Care Supplies
L33832	Tracheostomy Care Supplies
L37086	Transcranial Magnetic Stimulation (TMS)
L34641	Transcranial Magnetic Stimulation (TMS)
L34821	Transcutaneous Electrical Joint Stimulation Devices (TEJSD)
L33802	Transcutaneous Electrical Nerve Stimulators (TENS)
L33802	Transcutaneous Electrical Nerve Stimulators (TENS)
L38705	Transurethral Waterjet Ablation of the Prostate
L38705	Transactural Traterjet / Matter of the Freduct
(Notice Ends	Transurethral Waterjet Ablation of the Prostate
01/27/2024)	Transarethal Waterjet Ablation of the Frostate
L38682	
(Notice Ended	Transurethral Waterjet Ablation of the Prostate
10/14/2023)	Transactural Waterjet Asiation of the Flootate
L36538	Treatment of Males with Low Testosterone
L34209	Treatment of Wales With Low Testosterone Treatment of Varicose Veins of the Lower Extremities
L34536	Treatment of Varicose Veins of the Lower Extremities Treatment of Varicose Veins of the Lower Extremities
L34211	Trigger Point Injections
L34588	Trigger Points, Local Injections
L34823	Tumor Treatment Field Therapy (TTFT)
L07020	Tamor Treatment Flora Therapy (1111)

Medicare LCDs (California MAC)	For detailed information, please click here:
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 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - o Information written in other languages

If you need these services, contact Member Services.

If you believe that PHP has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with: Member Services, P.O. Box 46160, Los Angeles, CA 90046, (800) 263-0067, TTY 711, Fax (888) 235-8552, email php@positivehealthcare.org. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Member Services is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services 200 Independence Avenue, SW Room 509F, HHH Building Washington, DC 20201 1-800-368-1019, 1-800-537-7697 (TDD)

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.



ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-263-0067 (TTY: 711).

注意:如果您使用繁體中文,您可以免費獲得語言援助服務。請致電 1-800-263-0067(TTY:711)

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-263-0067 (TTY: 711).

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-263-0067 (TTY: 711).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-263-0067 (TTY: 711) 번으로 전화해 주십시오.

ՈՒՇԱԴՐՈՒԹՅՈՒՆ՝ Եթե խոսում եք հայերեն, ապա ձեզ անվմար կարող են տրամադրվել լեզվական աջակցության ծառայություններ: Զանգահարեք 1-800-263-0067 (TTY (հեռատիպ)՝ 711):

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با (TTY: 711) 1-800-263-0067 تماس بگیرید.

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-263-0067 (телетайп: 711).

注意事項:日本語を話される場合、無料の言語支援をご利用いただけます。1-800-263-0067 (TTY: 711) まで、お電話にてご連絡ください。

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم -263-800-1 0067 (رقم هاتف الصم والبكم: 711).

ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਸਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹੈ। 1-800-263-0067 (TTY: 711) 'ਤੇ ਕਾਲ ਕਰੋ।

ប្រយ័ត្ន៖ បើសិនជាអ្នកនិយាយ ភាសាខ្មែរ, សេវាជំនួយផ្នែកភាសា ដោយមិនគិតឈ្នួល គឺអាចមានសំរាប់បំរើអ្នក។ ចូរ ទូរស័ព្ទ 1-800-263-0067 (TTY: 711)។

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 1-800-263-0067 (TTY: 711).

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