

# Reimbursement Policy

## Emergency Department Evaluation & Management Services

REIMBURSEMENT POLICY NUMBER: 11

<b>Effective Date:</b> 8/1/2024	SCOPE AND APPLICATION.....	1
<b>Last Review Date:</b> 7/2024	POLICY STATEMENT.....	2
<b>Next Annual Review:</b> 7/2025	POLICY GUIDELINES.....	2
	CENTERS FOR MEDICARE AND MEDICAID SERVICES (CMS) .....	4
	BILLING AND CODING GUIDELINES .....	4
	CROSS REFERENCES.....	7
	REFERENCES.....	7
	POLICY REVISION HISTORY.....	8
	APPENDICES.....	8

**INSTRUCTIONS FOR USE:** Company reimbursement policies serve as guidance for the administration of plan benefits. Reimbursement policies do not constitute medical advice nor a guarantee of coverage. Company reimbursement policies are reviewed annually. The Companies reserve the right to determine the application of reimbursement policies and make revisions to reimbursement policies at any time. The scope and availability of all plan benefits are determined in accordance with the applicable coverage agreement. Any conflict or variance between the terms of the coverage agreement and Company Reimbursement Policy will be resolved in favor of the coverage agreement.

### SCOPE AND APPLICATION

**Provider Type:**

- Professional Claims
- DMEPOS Suppliers
- All health care services billed on CMS 1500 forms
- All health care services billed on CMS 1500 forms, and when specified to those billed on UB04 forms
- Facilities
- All health care services billed on UB04 forms (CMS 1450)

**Plan Product:**

- Commercial
- Medicare
- Medicaid/Oregon Health Plan (OHP)

**SCOPE:** Providence Health Plan, Providence Health Assurance, and Providence Plan Partners as applicable (referred to individually as “Company” and collectively as “Companies”).

Plan participating and contracted facilities reimbursed on any of the following payment methodologies:

- DRG
- Modified DRG
- Percentage of billed charges/per diem

## POLICY STATEMENT

Exceptions to the below policy criteria, include:

- Emergency Department (ED) visits resulting in inpatient admission. These will follow the guidelines outlined in **Reimbursement Policy 6: Outpatient Hospital Services Rendered Prior to an Inpatient Admission**. *If a member is admitted as an inpatient from the ED, the ED services provided to that member must be submitted on the same claim as the inpatient services and are not subject to this policy.*
  - Facilities under a case-rate agreement
  - Critical access hospital services
  - Trauma or critical care services
  - Surgical intensive care services
- I. When a facility or physician bills an emergency department visit involving an evaluation and management (E&M) code level 4 (99284) or level 5 (99285) with a low acuity non emergent (LANE) diagnosis code indicating a lower level of complexity or severity, the claim will be **denied as not reimbursable**.
- A. *In order to be considered for reimbursement, a corrected claim using the appropriate lower-level E&M code (e.g., 99281-99283) corresponding to the lower complexity diagnosis code(s) must be submitted.*

*Note:* a complete list of the diagnosis codes which are considered low acuity and non-emergent are included in [Appendix I](#) below.

## POLICY GUIDELINES

### DOCUMENTATION REQUIREMENTS

In order to provide an effective and accurate review of any reconsideration requests, the following documentation **must** be provided. If any of these items are not submitted, the review may be delayed and any decision outcome could be affected:

- Reconsideration letter summarizing the basis for the appeal; and
- Applicable medical records
  - Physician order(s)
  - Presenting symptoms
  - Diagnoses and treatment plan

- The medical records must provide documentation of the acuity, complexity, and severity that supports a level 4 or level 5 emergency department evaluation and management service.

## **BACKGROUND**

This policy addresses appropriate emergency department (ED) evaluation and management (E&M) levels based on the complexity of the condition treated in the ED. In the absence of national standards, the American College of Emergency Physicians (ACEP) developed ED level guidelines for assessing the appropriate level of E&M assigned to those services.<sup>1</sup> See [Table 2](#) below.

## **DEFINITIONS**

### *Acuity*

Patient acuity means the measure of a patient's severity of illness or medical conditions including, but not limited to, the stability of physiological and psychological parameters and the dependency needs of the patient. Higher patient acuity requires more intensive time and skills.<sup>2</sup>

### *Non-Emergent Conditions*

Care for conditions for which a delay of several hours would not increase the likelihood of an adverse outcome, planned or elective procedures, and/or care that does not require an inpatient setting.<sup>3</sup>

### *Definitions for Discharge Instructions per the American College of Emergency Physicians (ACEP)<sup>1</sup>*

#### Straightforward

Self-limited condition with no meds or home treatment required, signs and symptoms of wound infection explained, return to ED if problems develop.

#### Simple

OTC medications or treatment, simple dressing changes; patient demonstrates understanding quickly and easily.

#### Moderate

Head injury instructions, crutch training, bending, lifting, weight-bearing limitations, prescription medication with review of side effects and potential adverse reactions; patient may have questions, but otherwise demonstrates adequate understanding of instructions either verbally or by demonstration.

#### Complex

Multiple prescription medications and/or home therapies with review of side effects and potential adverse reactions; diabetic, seizure or asthma teaching in compromised or non-compliant patients;

patient/caregiver may demonstrate difficulty understanding instructions and may require additional directions to support compliance with prescribed treatment.

## CENTERS FOR MEDICARE AND MEDICAID SERVICES (CMS)

The Centers for Medicare and Medicaid Services (CMS) acknowledge that the reasons and resources reflected in a hospital component of a visit would be different than the physician component (hospitals bill for overhead, while physicians bill for performing the service). Therefore, CMS has instructed hospitals to develop internal guidelines to determine what level of visit to report for each patient.

In the 2008 Final Rule, CMS stated, “we note our expectation that hospitals’ internal guidelines would comport with the principles listed below.”<sup>4</sup>

- (1) The coding guidelines should follow the intent of the CPT code descriptor in that the guidelines should be designed to reasonably relate the intensity of hospital resources to the different levels of effort represented by the code (65 FR 18451).
- (2) The coding guidelines should be based on hospital facility resources. The guidelines should not be based on physician resources (67 FR 66792).
- (3) The coding guidelines should be clear to facilitate accurate payments and be usable for compliance purposes and audits (67 FR 66792).
- (4) The coding guidelines should meet the HIPAA requirements (67 FR 66792).
- (5) The coding guidelines should only require documentation that is clinically necessary for patient care (67 FR 66792).
- (6) The coding guidelines should not facilitate upcoding or gaming (67 FR 66792).

Additional guidelines added by CMS for coding and billing emergency department visits include:

- (7) The coding guidelines should be written or recorded, well-documented, and provide the basis for selection of a specific code.
- (8) The coding guidelines should be applied consistently across patients in the clinic or emergency department to which they apply.
- (9) The coding guidelines should not change with great frequency.
- (10) The coding guidelines should be readily available for fiscal intermediary (or, if applicable, MAC) review.
- (11) The coding guidelines should result in coding decisions that could be verified by other hospital staff, as well as outside sources.

The above criteria and reimbursement methodologies are consistent with the CMS guidance regarding appropriate coding and billing of emergency department billing for **facilities**.

## BILLING AND CODING GUIDELINES

Services provided in the ED billed with E&M CPT codes 99281 – 99285, which represent five levels.

**Table 1: Applicable CPT Codes and Descriptions**

CPT Code	Description
----------	-------------

99281	Emergency department visit for the evaluation and management of a patient that <b>may not require the presence of a physician or other qualified health care professional</b>
99282	Emergency department visit for the evaluation and management of a patient, which requires a medically appropriate history and/or examination and <b>straightforward</b> medical decision making
99283	Emergency department visit for the evaluation and management of a patient, which requires a medically appropriate history and/or examination and <b>low level</b> of medical decision making
99284	Emergency department visit for the evaluation and management of a patient, which requires a medically appropriate history and/or examination and <b>moderate level</b> of medical decision making
99285	Emergency department visit for the evaluation and management of a patient, which requires a medically appropriate history and/or examination and <b>high level</b> of medical decision making

**Table 2: ACEP ED Facility Level Coding Guidelines<sup>1</sup>**

*Note: The table below is not all-inclusive. It provides examples of facility and physician intervention that align with the E&M service.*

Level	Possible Interventions	Potential Symptoms/Examples Which Support the Interventions
Level I: 99281	<ul style="list-style-type: none"> <li>Initial Assessment</li> <li>No medication or treatments</li> <li>Rx refill only, asymptomatic</li> <li>Note for Work or School</li> <li>Wound recheck.</li> <li>Booster or follow up immunization, no acute injury.</li> <li>Dressing changes (uncomplicated)</li> <li>Suture removal (uncomplicated)</li> <li>Discussion of Discharge</li> <li>Instructions (Straightforward)</li> </ul>	<ul style="list-style-type: none"> <li>Insect bite (uncomplicated)</li> <li>Read Tb test</li> </ul>
Level II: 99282	<p>Could include interventions from previous levels, plus any of:</p> <ul style="list-style-type: none"> <li>Tests by ED Staff (Urine dip, stool hemocult, AccuCheck or Dextrostix)</li> <li>Visual Acuity (Snellen)</li> <li>Obtain clean catch urine.</li> <li>Apply ace wrap or sling.</li> <li>Prep or assist w/ procedures such as: minor laceration repair, I&amp;D of simple abscess, etc.</li> <li>Discussion of Discharge Instructions (Simple)</li> </ul>	<ul style="list-style-type: none"> <li>Localized skin rash, lesion, sunburn</li> <li>Minor viral infection</li> <li>Eye discharge- painless</li> <li>Ear Pain</li> <li>Urinary frequency without fever</li> <li>Simple trauma (with no X-rays)</li> </ul>
Level III: 99283	<p>Could include interventions from previous levels, plus any of:</p> <ul style="list-style-type: none"> <li>Receipt of EMS/Ambulance patient</li> <li>Heparin/saline lock</li> <li>Nebulizer treatment</li> </ul>	<ul style="list-style-type: none"> <li>Minor trauma (with potential complicating factors)</li> <li>Medical conditions requiring prescription drug management.</li> <li>Fever which responds to antipyretics</li> </ul>

	<ul style="list-style-type: none"> <li>• Preparation for lab tests described in CPT (80048-87999 codes) Preparation for EKG</li> <li>• Preparation for plain X-rays of only 1 area (hand, shoulder, pelvis, etc.)</li> <li>• Prescription medications administered PO.</li> <li>• Foley catheters; In &amp; Out cath</li> <li>• C-Spine precautions</li> <li>• Fluorescein stain</li> <li>• Emesis/ Incontinence care</li> <li>• Prep or assist w/procedures such as: joint aspiration/injection, simple fracture care etc.</li> <li>• Mental Health-anxious, simple treatment</li> <li>• Routine psych medical clearance</li> <li>• Limited social worker intervention</li> <li>• Post-mortem care</li> <li>• Direct Admit via ED</li> <li>• Discussion of Discharge Instructions (Moderate Complexity)</li> </ul>	<ul style="list-style-type: none"> <li>• Headache - History of, no serial exam</li> <li>• Head injury- without neurologic symptoms.</li> <li>• Eye pain</li> <li>• Mild dyspnea -not requiring oxygen</li> </ul>
Level IV: 99284	<p>Could include interventions from previous levels, plus any of:</p> <ul style="list-style-type: none"> <li>• Preparation for 2 diagnostic tests2: (Labs, EKG, X-ray)</li> <li>• Prep for plain X-ray (multiple body areas):</li> <li>• C-spine &amp; foot, shoulder &amp; pelvis</li> <li>• Prep for special imaging study (CT, MRI, Ultrasound, VQ scans)</li> <li>• Cardiac Monitoring (2) Nebulizer treatments</li> <li>• Port-A-Cath venous access</li> <li>• Administration and Monitoring of infusions or parenteral medications (IV, IM, IO, SC) NG/PEG</li> <li>• Tube Placement/Replacement Multiple reassessments.</li> <li>• Prep or assist w/procedures such as: eye irrigation with Morgan lens, bladder irrigation with 3-way foley, pelvic exam, etc.</li> <li>• Sexual Assault Exam w/ out specimen collection Psychotic patient; not suicidal</li> <li>• Discussion of Discharge Instructions (Complex)</li> </ul>	<ul style="list-style-type: none"> <li>• Blunt/ penetrating trauma- with limited diagnostic testing</li> <li>• Headache with nausea/ vomiting</li> <li>• Dehydration requiring treatment.</li> <li>• Vomiting requiring treatment.</li> <li>• Dyspnea requiring oxygen.</li> <li>• Respiratory illness relieved with (2) nebulizer treatments.</li> <li>• Chest Pain--with limited diagnostic testing</li> <li>• Abdominal Pain - with limited diagnostic testing</li> <li>• Non-menstrual vaginal bleeding</li> <li>• Neurologic symptoms - with limited diagnostic testing</li> </ul>
Level V: 99285	<p>Could include interventions from previous levels, plus any of:</p> <ul style="list-style-type: none"> <li>• Requires frequent monitoring of multiple vital signs (i.e., O2 sat, BP, cardiac rhythm, respiratory rate)</li> <li>• Preparation for ≥ 3 diagnostic tests2: (Labs, EKG, X-ray)</li> </ul>	<ul style="list-style-type: none"> <li>• Blunt/ penetrating trauma requiring multiple diagnostic tests.</li> <li>• Systemic multi-system medical emergency requiring multiple diagnostics.</li> <li>• Severe infections requiring IV/IM antibiotics.</li> </ul>

	<ul style="list-style-type: none"> <li>• Prep for special imaging study (CT, MRI, Ultrasound, VQ scan) combined with multiple tests or parenteral medication or oral or IV contrast.</li> <li>• Administration of Blood Transfusion/Blood Products Oxygen via face mask or NRB Multiple Nebulizer Treatments: (3) or more (if nebulizer is continuous, each 20-minute period is considered treatment)</li> <li>• Moderate Sedation</li> <li>• Prep or assist with procedures such as: central line insertion, gastric lavage, LP, paracentesis, etc.</li> <li>• Cooling or heating blanket</li> <li>• Extended Social Worker intervention</li> <li>• Sexual Assault Exam w/ specimen collection by ED staff</li> <li>• Coordination of hospital admission/transfer or change in living situation or site.</li> <li>• Physical/Chemical restraints</li> <li>• Suicide Watch</li> <li>• Critical Care less than 30 minutes</li> </ul>	<ul style="list-style-type: none"> <li>• Uncontrolled DM</li> <li>• Severe burns</li> <li>• Hypothermia</li> <li>• New onset altered mental status</li> <li>• Headache (severe): CT and/or LP</li> <li>• Chest Pain--multiple diagnostic tests/treatments</li> <li>• Respiratory illness--relieved by (3) or more nebulizer treatments</li> <li>• Abdominal Pain--multiple diagnostic tests/treatments</li> <li>• Major musculoskeletal injury</li> <li>• Acute peripheral vascular compromise of extremities</li> <li>• Neurologic symptoms - multiple diagnostic tests/treatments</li> <li>• Toxic ingestions</li> <li>• Mental health problem - suicidal/homicidal</li> </ul>
--	---	--

### Low Acuity Non-Emergent Diagnosis Codes

A complete list of the diagnosis codes which are considered low acuity and non-emergent are included in [Appendix I](#) below.

## CROSS REFERENCES

- [Facility Routine Supplies and Services](#), RP43
- [Outpatient Hospital Services Rendered Prior to an Inpatient Admission](#), RP6
- [Reasonable Billing Practices](#), CP78.0

## REFERENCES

1. American College of Emergency Physicians: ED Facility Level Coding Guidelines. <https://www.acep.org/administration/reimbursement/ed-facility-level-coding-guidelines>. Accessed 6/27/2024.
2. Law Insider: Patient acuity definition. <https://www.lawinsider.com/dictionary/patient-acuity>. Accessed 6/27/2024.
3. Providence Health Plan Utilization Management Department standard definition: non-emergent conditions. Last reviewed 6/27/2024.
4. Centers for Medicare and Medicaid Services (CMS). Federal Register / Vol. 72, No. 227 / Tuesday, November 27, 2007 / Rules and Regulations. <https://www.govinfo.gov/content/pkg/FR-2007-11-27/pdf/07-5507.pdf>. Accessed 6/24/2024.

## POLICY REVISION HISTORY

Date	Revision Summary
8/2024	New reimbursement policy

## APPENDICES

### Appendix I: Low Acuity Non-Emergent Diagnosis Codes

A64	F5109	H00019	H1033	H11412	H60533
B002	F5119	H0011	H10401	H11421	H60539
B009	F513	H0012	H10402	H11422	H60541
B019	F514	H0013	H10403	H11423	H60542
B029	F515	H0014	H10409	H11429	H60543
B070	F518	H0015	H10411	H1189	H60549
B079	F519	H0016	H10412	H119	H60551
B081	F952	H0019	H10413	H5710	H60552
B084	F958	H01001	H10419	H578	H60553
B085	F959	H01002	H1045	H60311	H60559
B09	F985	H01003	H10501	H60312	H60591
B2780	G43109	H01004	H10502	H60313	H60592
B2790	G43809	H01005	H10503	H60319	H60593
B2799	G43909	H01006	H10509	H60331	H60599
B338	G43B0	H01009	H10511	H60332	H6060
B350	G43C0	H019	H10512	H60333	H6061
B354	G43D0	H10011	H10513	H60339	H6062
B355	G441	H10012	H10519	H60391	H6063
B370	G44209	H10013	H1089	H60392	H608X1
B373	G5600	H10019	H109	H60393	H608X2
B3783	G5601	H10021	H11001	H60399	H608X3
B379	G5602	H10022	H11002	H60501	H608X9
B86	G5621	H10023	H11003	H60502	H6090
B9710	G5622	H10029	H11009	H60503	H6091
B9711	G5631	H1010	H11011	H60509	H6092
B974	G5691	H1011	H11012	H60511	H6093
B9789	G5692	H1012	H11013	H60512	H61101
E109	G609	H1013	H11019	H60513	H61102
E118	G8929	H10231	H11041	H60519	H61103
E119	H00011	H10232	H11042	H60521	H61109
F508	H00012	H10233	H11043	H60522	H61191
F509	H00013	H10239	H11049	H60523	H61192
F5101	H00014	H1030	H11152	H60529	H61193
F5102	H00015	H1031	H11153	H60531	H61199
F5103	H00016	H1032	H11222	H60532	H6120



H6121	H6523	H833X9	J3089	K601	L251
H6122	H65411	H9201	J309	K602	L252
H6123	H65412	H9202	J310	K640	L253
H61891	H65413	H9203	J320	K641	L254
H61892	H65419	H9209	J321	K642	L255
H61893	H65491	H9210	J322	K643	L258
H61899	H65492	H9211	J323	K644	L259
H6190	H65493	H9212	J324	K649	L270
H6191	H65499	H9213	J328	K8020	L271
H6192	H6590	H9220	J329	L0292	L272
H6193	H6591	H9221	J340	L0293	L279
H6240	H6592	H9222	J341	L0591	L299
H6241	H6593	H9223	J3489	L0592	L300
H6242	H66001	H9311	J349	L089	L301
H6243	H66002	H9312	J40	L2081	L302
H628X1	H66003	H9313	J410	L2082	L308
H628X2	H66004	H9319	J411	L2084	L309
H628X3	H66005	H93291	J418	L2089	L42
H628X9	H66006	H93292	J42	L209	L500
H6500	H66007	H93293	K009	L210	L509
H6501	H66009	H93299	K010	L218	L550
H6502	H6611	H938X1	K011	L219	L551
H6503	H6612	H938X2	K044	L22	L559
H6504	H6613	H938X3	K0510	L230	L562
H6505	H663X1	H938X9	K1120	L231	L563
H6506	H663X2	H9390	K1121	L232	L569
H6507	H663X3	H9391	K120	L233	L578
H65111	H6640	H9392	K131	L234	L600
H65112	H6641	H9393	K134	L235	L601
H65113	H6642	H9480	K136	L236	L602
H65114	H6643	H9481	K1370	L237	L603
H65115	H6690	H9482	K1379	L2381	L604
H65116	H6691	H9483	K4090	L2389	L605
H65117	H6692	I10	K429	L239	L608
H65119	H6693	I129	K5090	L240	L609
H65191	H68101	J00	K5190	L241	L62
H65192	H68102	J0380	K522	L242	L630
H65193	H68103	J0381	K5289	L243	L631
H65194	H68109	J0390	K529	L244	L632
H65195	H6980	J0391	K5732	L245	L638
H65196	H6981	J040	K5792	L246	L639
H65197	H6982	J300	K580	L247	L640
H65199	H6983	J301	K589	L2481	L648
H6520	H833X1	J302	K591	L2489	L649
H6521	H833X2	J305	K598	L249	L651
H6522	H833X3	J3081	K599	L250	L652

L658	M2392	M65841	M7750	N3942	R350
L659	M25461	M65842	M7751	N3944	R351
L660	M25462	M65862	M7752	N3945	R358
L662	M25469	M6588	M778	N3946	R360
L663	M2550	M67351	M779	N39490	R369
L668	M25511	M67352	M791	N398	R3911
L669	M25512	M67361	M792	N399	R3912
L700	M25519	M67362	M79601	N644	R3913
L701	M25521	M7021	M79602	N763	R3914
L703	M25522	M7022	M79603	N8320	R3915
L705	M25529	M7041	M79604	N8329	R3916
L708	M25531	M7051	M79605	R040	R3919
L709	M25532	M7052	M79606	R05	R42
L720	M25539	M7061	M79609	R064	R498
L723	M25561	M7062	M79621	R066	R52
L728	M25562	M7071	M79622	R070	R5381
L729	M25569	M722	M79631	R093	R5383
L730	M25571	M75102	M79632	R0981	R590
L731	M25572	M7521	M79641	R110	R591
L732	M25579	M7522	M79642	R140	R599
L738	M2660	M7531	M79643	R141	R61
L739	M2669	M7541	M79644	R142	S0006XA
L740	M2679	M7542	M79645	R143	S0031XA
L741	M5117	M7551	M79646	R194	S0033XA
L742	M533	M7552	M79651	R195	S0036XA
L743	M5410	M7581	M79652	R197	S00411A
L744	M5416	M7582	M79661	R198	S00412A
L74510	M5417	M7591	M79662	R21	S00419A
L74511	M542	M7631	M79669	R221	S00431A
L74512	M5430	M7632	M79671	R222	S00432A
L74513	M5431	M7651	M79672	R2230	S00439A
L74519	M5432	M7652	M79673	R2231	S00461A
L7452	M5440	M7660	M79674	R2232	S00462A
L748	M5441	M7661	M79675	R2233	S00469A
L749	M5442	M7662	M797	R2241	S00511A
L750	M546	M7671	M7989	R2242	S00512A
L751	M5489	M76891	M940	R2243	S00531A
L752	M549	M76892	N3010	R229	S00532A
L758	M6088	M76899	N3080	R232	S00561A
L759	M609	M769	N3090	R233	S00562A
L84	M6248	M7710	N341	R234	S0086XA
L853	M62830	M7711	N342	R238	S0096XA
L983	M62831	M7712	N368	R239	S038XXA
M109	M62838	M7731	N390	R252	S039XXA
M2390	M65812	M7732	N393	R300	S100XXA
M2391	M65832	M7742	N3941	R309	S1016XA

S1081XA	S30864A	S50811A	S60412A	S62669A	S6390XA
S1086XA	S30865A	S50812A	S60413A	S63501A	S6391XA
S1091XA	S30866A	S50819A	S60414A	S63502A	S6392XA
S1096XA	S30867A	S50861A	S60415A	S63509A	S66011A
S134XXA	S335XXA	S50862A	S60416A	S63601A	S66012A
S138XXA	S338XXA	S50869A	S60417A	S63602A	S66019A
S139XXA	S339XXA	S6000XA	S60418A	S63609A	S66110A
S161XXA	S39011A	S60011A	S60419A	S63610A	S66111A
S20111A	S39012A	S60012A	S60511A	S63611A	S66112A
S20112A	S39013A	S60019A	S60512A	S63612A	S66113A
S20119A	S43401A	S60021A	S60519A	S63613A	S66114A
S20161A	S43402A	S60022A	S60811A	S63614A	S66115A
S20162A	S43409A	S60029A	S60812A	S63615A	S66116A
S20169A	S43491A	S60031A	S60819A	S63616A	S66117A
S20211A	S43492A	S60032A	S60861A	S63617A	S66118A
S20212A	S43499A	S60039A	S60862A	S63618A	S66119A
S20219A	S4360XA	S60041A	S60869A	S63619A	S66211A
S20311A	S4361XA	S60042A	S62640A	S63621A	S66212A
S20312A	S4362XA	S60049A	S62641A	S63622A	S66219A
S20319A	S4390XA	S60051A	S62642A	S63629A	S66310A
S20361A	S4391XA	S60052A	S62643A	S63630A	S66311A
S20362A	S4392XA	S60059A	S62644A	S63631A	S66312A
S20369A	S46011A	S6010XA	S62645A	S63632A	S66313A
S20411A	S46012A	S60111A	S62646A	S63633A	S66314A
S20412A	S46019A	S60112A	S62647A	S63634A	S66315A
S20419A	S46111A	S60119A	S62648A	S63635A	S66316A
S20461A	S46112A	S60121A	S62649A	S63636A	S66317A
S20462A	S46119A	S60122A	S62650A	S63637A	S66318A
S20469A	S46211A	S60129A	S62651A	S63638A	S66319A
S2091XA	S46212A	S60131A	S62652A	S63639A	S66411A
S2096XA	S46219A	S60132A	S62653A	S63681A	S66412A
S2341XA	S46311A	S60139A	S62654A	S63682A	S66419A
S239XXA	S46312A	S60141A	S62655A	S63689A	S66510A
S29011A	S46319A	S60142A	S62656A	S63690A	S66511A
S29012A	S46811A	S60149A	S62657A	S63691A	S66512A
S29019A	S46812A	S60151A	S62658A	S63692A	S66513A
S300XXA	S46819A	S60152A	S62659A	S63693A	S66514A
S30810A	S46911A	S60159A	S62660A	S63694A	S66515A
S30811A	S46912A	S60221A	S62661A	S63695A	S66516A
S30815A	S46919A	S60222A	S62662A	S63696A	S66517A
S30816A	S50311A	S60229A	S62663A	S63697A	S66518A
S30817A	S50312A	S60311A	S62664A	S63698A	S66519A
S30860A	S50319A	S60312A	S62665A	S63699A	S66811A
S30861A	S50361A	S60319A	S62666A	S638X1A	S66812A
S30862A	S50362A	S60410A	S62667A	S638X2A	S66819A
S30863A	S50369A	S60411A	S62668A	S638X9A	S66911A

S66912A	S76911A	S80861A	S90561A	S92524A	S96111A
S66919A	S76912A	S80862A	S90562A	S92525A	S96112A
S7010XA	S76919A	S80869A	S90569A	S92526A	S96119A
S70211A	S8000XA	S8390XA	S92404A	S92534A	S96211A
S70212A	S8001XA	S8391XA	S92405A	S92535A	S96212A
S70219A	S8002XA	S8392XA	S92406A	S92536A	S96219A
S70261A	S8010XA	S86011A	S92414A	S93401A	S96811A
S70262A	S8011XA	S86012A	S92415A	S93402A	S96812A
S70269A	S8012XA	S86019A	S92416A	S93409A	S96819A
S70311A	S80211A	S86911A	S92424A	S93491A	S96911A
S70312A	S80212A	S86912A	S92425A	S93492A	S96912A
S70319A	S80219A	S86919A	S92426A	S93499A	S96919A
S70361A	S80261A	S9030XA	S92504A	S93601A	T148
S70362A	S80262A	S9031XA	S92505A	S93602A	T1490
S70369A	S80269A	S9032XA	S92506A	S93609A	T7840XA
S73101A	S80811A	S90511A	S92514A	S96011A	T7849XA
S73102A	S80812A	S90512A	S92515A	S96012A	
S73109A	S80819A	S90519A	S92516A	S96019A	