

# WTC-5 Medical Code Request Form

(ex: ICD, CPT, HCPCS, DME)

**Submission Instructions:** Please complete this form and send it to the World Trade Center Health Program at [WTCMedCode@csc.com](mailto:WTCMedCode@csc.com). Please do not include any member personally identifiable information (PII). Incomplete forms will be sent back for more information.

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## Requester Information

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Request Date

Choose a CCE/NPN

Requester Name

Requester E-mail

Requester Phone

Clinical Director Name

Clinical Director Signature

Request Urgency

- Urgent  
 Routine

Urgency Rationale

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## Code Request Information

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Code Type

Code Number

Code Description

**Rationale:** Please describe the medical condition or procedure/service represented by this code. Please also include medical/scientific evidence-based information on the medical necessity of this code and its relationship to a WTC-related/medically associated condition. If request is for an ICD code addition as a WTC-Associated condition, please note to which WTC-related condition it is being associated and how it is associated (progression of the WTC-related condition, due to treatment of the WTC-related condition, etc.). Please identify any additional benefit that this code would provide to the WTCHP in relation to similar codes that are already available through the program.

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### Requested Codebook Placement

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Condition Type

Placement for ICD Code Request

- Adjustment Disorder
- Anxiety
- Cancer Diagnostics
- Cancer Treatment
- Depression
- Diagnostics
- Gastroesophageal Reflux Disease
- Interstitial Lung Disease (including Sarcoid)
- Monitoring
- Musculoskeletal Disorders
- Obstructive Airway Disease
- Post Traumatic Stress Disorder
- Substance Abuse
- Survivor Screening
- Upper Respiratory Disease
- Other

- Placement for Procedure Code Request
- Cancer Diagnostics
  - Cancer Treatment
  - Diagnostics
  - Monitoring
  - Survivor Screening
  - Treatment

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### **CCE/NPN Clinical Director Comments and Approval of Request**

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CCE/NPN Clinical Director Comments:

CCE/NPN Clinical Director Signature and Credentials

Date Signed: