STATE OF IOWA DEPARTMENT OF Health and Human services

Coverage & Billing Information for the 2023 Quarterly Code Update

BACKGROUND

Iowa Medicaid has reviewed the QI 2023 Billing Code Update to determine coverage and billing guidelines. The Iowa Medicaid coverage and billing information provided in this bulletin is effective January I, 2023. This bulletin serves as a notice of the following information:

Table I

 New Current Procedural Terminology (CPT[®]) and Healthcare Common Procedure Coding System (HCPCS) codes included in the Q1 2023 code update. Coverage and billing information for these codes applies to dates of service on or after January 1, 2023.

Table 2

 New Current Dental Terminology (CDT©) codes included in the QI 2023 code update. Coverage and billing information for these codes applies to dates of service on or after January I, 2023.

Table 3

 International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) codes. Coverage and billing for these codes applies to dates of service on or after April 1, 2023.

Table 4

 International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS) codes. Coverage and billing for these codes applies to dates of service on or after April 1, 2023.

Table 5

 Modifiers included in the QI 2023 code update. Coverage and billing information for these codes applies to dates of service on or after January I, 2023.

Table 6

 CPT[®], CDT[®], & HCPCS codes that require Pre-Pay or Post-Pay claim review for Fee For Service (FFS) (traditional Medicaid) effective January 1, 2023.

Table 7

 Non-Covered Codes - CPT[®], CDT[®], HCPCS, ICD-10-CM & ICD-10-PCS codes that have been thoroughly reviewed and Iowa Medicaid has decided not to cover effective January 1, 2023.

Table 8

 Deleted Codes - CPT©, CDT©, HCPCS, ICD-10-CM & ICD-10-PCS codes that have been discontinued effective December 31, 2022. The standard global billing procedures and edits apply to the new codes unless special billing guidance is otherwise noted. Reimbursement, prior authorization (PA), and billing information apply to services delivered under the fee-for-service (FFS) delivery system. Questions about FFS PA should be directed to Iowa Medicaid Provider Services at I-800-338-7909 or via email at <u>imeproviderservices@dhs.state.ia.us</u>.

Managed Care Organization (MCOs) establish and publish reimbursement, PA, and billing information within the managed care delivery system. Questions about managed care PA should be directed to the MCO with which the member is enrolled.

Amerigroup Iowa, Inc.:

- Provider Services: I-800-454-3730
- Provider email: iowamedicaid@amerigroup.com
- Website: <u>https://providers.amerigroup.com/ia</u>

Iowa Total Care:

- Provider Services: I-833-404-1061
- Provider email: Providers may send email using their account on the ITC website.
- Website: <u>https://www.iowatotalcare.com</u>

The **QI 2023** code update may include modifications to descriptions for some existing HCPCS/CPT codes. These modifications are available for reference or download from the CMS website at <u>www.cms.gov</u>.

The **Q1** code update also includes a list of deleted codes. These codes are available for reference or download from the CMS website at cms.gov. If there is a replacement code, Iowa Medicaid has added the replacement code for which there were deleted codes effective as of **December 31, 2023**.

Medically Unlikely Edits are the maximum units of service that a provider would report under most circumstances for a <u>single beneficiary</u> on a <u>single date of service</u>. The **max units** listed in the tables below are derived from the quarterly <u>Medicaid NCCI Edits</u> released by CMS.

Iowa Medicaid will update the fee schedule as rates become available.

STATE OF IOWA DEPARTMENT OF Health

SERVICES

Table I - CPT[©] & HCPCS Codes

Table I -	- CPT© & HCPCS Codes		Back to top
Code	Desc	Effective Date	Special Billing Information
15778	Implantation of absorbable mesh or other prosthesis for delayed closure of defect(s) (i.e., external genitalia, perineum, abdominal wall) due to soft tissue infection or trauma	1/1/2023	Max Units: I
15853	Removal of sutures or staples not requiring anesthesia (List separately in addition to E/M code)	1/1/2023	Max Units: I
15854	Removal of sutures and staples not requiring anesthesia (List separately in addition to E/M code)	1/1/2023	Max Units: I
33900	Percutaneous pulmonary artery revascularization by stent placement, initial; normal native connections, unilateral	1/1/2023	Max Units: I
33901	Placement of stent in pulmonary arteries with normal anatomical connections, on both sides of body	1/1/2023	Max Units: I
33902	Percutaneous pulmonary artery revascularization by stent placement, initial; abnormal connections, unilateral	1/1/2023	Max Units: I
33903	Placement of stent in pulmonary arteries with abnormal anatomical connections, on both sides of body	1/1/2023	Max Units: I
33904	Placement of additional stent in pulmonary artery	1/1/2023	Max Units: I
49591	Repair of anterior abdominal hernia(s) (i.e., epigastric, incisional, ventral, umbilical, spigelian), any approach (i.e., open, laparoscopic, robotic), initial, including implantation of mesh or other prosthesis when performed, total length of defect(s); less than 3 cm, reducible	1/1/2023	Max Units: I
49592	Repair of anterior abdominal hernia(s) (i.e., epigastric, incisional, ventral, umbilical, spigelian), any approach (i.e., open, laparoscopic, robotic), initial, including implantation of mesh or other prosthesis when performed, total length of defect(s); less than 3 cm, incarcerated or strangulated	1/1/2023	Max Units: I
49593	Repair of anterior abdominal hernia(s) (i.e., epigastric, incisional, ventral, umbilical, spigelian), any approach (i.e., open, laparoscopic, robotic), initial, including implantation of mesh or other prosthesis when performed, total length of defect(s); 3 cm to 10 cm, reducible	1/1/2023	Max Units: I
49594	Repair of anterior abdominal hernia(s) (i.e., epigastric, incisional, ventral, umbilical, spigelian), any approach (i.e., open, laparoscopic, robotic), initial, including implantation of mesh or other prosthesis when performed, total length of defect(s); 3 cm to 10 cm, incarcerated or strangulated	1/1/2023	Max Units: I
49595	Repair of anterior abdominal hernia(s) (i.e., epigastric, incisional, ventral, umbilical, spigelian), any approach (i.e., open, laparoscopic, robotic), initial, including implantation of mesh or other prosthesis when performed, total length of defect(s); greater than 10 cm, reducible	1/1/2023	Max Units: I
49596	Repair of anterior abdominal hernia(s) (i.e., epigastric, incisional, ventral, umbilical, spigelian), any approach (i.e., open, laparoscopic, robotic), initial, including implantation of mesh or other prosthesis when performed, total length of defect(s); greater than 10 cm, incarcerated or strangulated	1/1/2023	Max Units: I
49613	Repair of anterior abdominal hernia(s) (i.e., epigastric, incisional, ventral, umbilical, spigelian), any approach (i.e., open, laparoscopic, robotic), recurrent, including implantation of mesh or other prosthesis when performed, total length of defect(s); less than 3 cm, reducible	1/1/2023	Max Units: I

49614	Repair of anterior abdominal hernia(s) (i.e., epigastric, incisional, ventral, umbilical, spigelian), any approach	1/1/2023	Max Units: I
	(i.e., open, laparoscopic, robotic), recurrent, including implantation of mesh or other prosthesis when		
	performed, total length of defect(s); less than 3 cm, incarcerated or strangulated		
49615	Repair of anterior abdominal hernia(s) (i.e., epigastric, incisional, ventral, umbilical, spigelian), any approach	1/1/2023	Max Units: I
	(i.e., open, laparoscopic, robotic), recurrent, including implantation of mesh or other prosthesis when		
	performed, total length of defect(s); 3 cm to 10 cm, reducible		
49616	Repair of anterior abdominal hernia(s) (i.e., epigastric, incisional, ventral, umbilical, spigelian), any approach	1/1/2023	Max Units: I
	(i.e., open, laparoscopic, robotic), recurrent, including implantation of mesh or other prosthesis when		
	performed, total length of defect(s); 3 cm to 10 cm, incarcerated or strangulated		
49617	Repair of anterior abdominal hernia(s) (i.e., epigastric, incisional, ventral, umbilical, spigelian), any approach	1/1/2023	Max Units: I
	(i.e., open, laparoscopic, robotic), recurrent, including implantation of mesh or other prosthesis when		
	performed, total length of defect(s); greater than 10 cm, reducible		
49618	Repair of anterior abdominal hernia(s) (i.e., epigastric, incisional, ventral, umbilical, spigelian), any approach	1/1/2023	Max Units: I
	(i.e., open, laparoscopic, robotic), recurrent, including implantation of mesh or other prosthesis when		
	performed, total length of defect(s); greater than 10 cm, incarcerated or strangulated		
49621	Repair of sliding hernia next to stoma	1/1/2023	Max Units: I
49622	Repair of parastomal hernia, any approach (i.e., open, laparoscopic, robotic), initial or recurrent, including	1/1/2023	Max Units: I
	implantation of mesh or other prosthesis, when performed; incarcerated or strangulated		
49623	Removal of total or near total non-infected mesh or other prosthesis at the time of initial or recurrent	1/1/2023	Max Units: I
	anterior abdominal hernia repair or parastomal hernia repair, any approach (i.e., open, laparoscopic, robotic)		
	(List separately in addition to code for primary procedure)		
55867	Laparoscopy, surgical prostatectomy, simple subtotal (including control of postoperative bleeding, vasectomy,	1/1/2023	Max Units: I
	meatotomy, urethral calibration and/or dilation, and internal urethrotomy), includes robotic assistance, when		
	performed		
76883	Ultrasound, nerve(s) and accompanying structures throughout their entire anatomic course in one extremity,	1/1/2023	Max Units: 4
	comprehensive, including real-time cine imaging with image documentation, per extremity		
84433	Thiopurine S-methyltransferase (TPMT)	1/1/2023	Max Units: I
87467	Measurement of Hepatitis B surface antigen (HBsAg	1/1/2023	Max Units: I
87468	Infectious agent detection by nucleic acid (DNA or RNA); Ana plasma phagocytophilum, amplified probe	1/1/2023	Max Units: I
	technique		
87469	Detection of Babesia microtia by amplified nucleic acid probe technique	1/1/2023	Max Units: I
87478	Detection of Babesia Borrelia miyamotoi by amplified nucleic acid probe technique	1/1/2023	Max Units: I
87484	Detection of Ehrlichia chaffeensis by amplified nucleic acid probe technique	1/1/2023	Max Units: I

01212		0/21/2022	
9 3 2*	Severe acute respiratory syndrome coronavirus 2 (sars-cov-2) (coronavirus disease [covid19]) vaccine, mrna- Inp, bivalent spike protein, preservative free, 30 mcg/0.3 ml dosage, trissucrose formulation, for intramuscular	8/31/2022	
	use		
9 3 3*	Severe acute respiratory syndrome coronavirus 2 (sars-cov-2) (coronavirus disease [covid19]) vaccine, mrna-	8/31/2022	
	Inp, spike protein, bivalent, preservative free, 50 mcg/0.5 ml dosage, for intramuscular use		
9 3 4*	Sarscov2 vac bvl 25mcg/.25ml	10/12/2022	
91315*	Sarscov2 vac bvl 10mcg/0.2ml	10/12/2022	
93569	Injection procedure during cardiac catheterization including imaging supervision, interpretation, and report; for	1/1/2023	Max Units: I
	selective pulmonary arterial angiography, unilateral (List separately in addition to code for primary procedure)		
93573	Injection procedure during cardiac catheterization including imaging supervision, interpretation, and report; for	1/1/2023	Max Units: I
	selective pulmonary arterial angiography, bilateral (List separately in addition to code for primary procedure)		
93574	Injection procedure during cardiac catheterization including imaging supervision, interpretation, and report; for	1/1/2023	Max Units: 4
	selective pulmonary venous angiography of each distinct pulmonary vein during cardiac catheterization (List		
	separately in addition to code for primary procedure)		
93575	Injection procedure during cardiac catheterization including imaging supervision, interpretation, and report; for	1/1/2023	Max Units: I
	selective pulmonary angiography of major aortopulmonary collateral arteries (MAPCAs) arising off the aorta		
	or its systemic branches, during cardiac catheterization for congenital heart defects, each distinct vessel (List		
	separately in addition to code for primary procedure)		
99418	Prolonged inpatient or observation evaluation and management service(s) time with or without direct patient	1/1/2023	Max Units: 4
	contact beyond the required time of the primary service when the primary service level has been selected		
	using total time, each 15 minutes of total time (List separately in addition to the code of the inpatient and		
	observation Evaluation and Management service)		
0044 A *	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2	10/19/2022	
	(sarscov-2) (coronavirus disease [covid-19]) vaccine, recombinant spike protein nanoparticle, saponin-based		
01240	adjuvant, preservative free, 5 mcg/0.5 ml dosage; booster dose	0/21/2022	
0124A*	Adm sarscv2 bvl 30mcg/.3ml b	8/31/2022	
0134A*	Adm sarscv2 bvl 50mcg/.5ml b	8/31/2022	
0144A*	Adm srscv2 bvl 25mcg/.25ml b	10/12/2022	
0154A*	Adm sarscv2 bvl 10mcg/.2ml b	10/12/2022	
C1826	Generator, neurostimulator (implantable), includes closed feedback loop leads and all implantable components,	1/1/2023	Max Units: I
<u> </u>	with rechargeable battery and charging system	1/1/2022	
C1827	Generator, neurostimulator (implantable), non-rechargeable, with implantable stimulation lead and external	1/1/2023	Max Units: I
	paired stimulation controller		

C7501	Percutaneous breast biopsies using stereotactic guidance, with placement of breast localization device(s) (eg, clip, metallic pellet), when performed, and imaging of the biopsy specimen, when performed, all lesions unilateral and bilateral (for single lesion biopsy, use appropriate code)	1/1/2023	Max Units: I
C7502	Percutaneous breast biopsies using magnetic resonance guidance, with placement of breast localization device(s) (eg, clip, metallic pellet), when performed, and imaging of the biopsy specimen, when performed, all lesions unilateral or bilateral (for single lesion biopsy, use appropriate code)	1/1/2023	Max Units: I
C7503	Open biopsy or excision of deep cervical node(s) with intraoperative identification (eg, mapping) of sentinel lymph node(s) including injection of non-radioactive dye when performed	1/1/2023	Max Units: I
C7504	Percutaneous vertebroplasties (bone biopsies included when performed), first cervicothoracic and any additional cervicothoracic or lumbosacral vertebral bodies, unilateral or bilateral injection, inclusive of all imaging guidance	1/1/2023	Max Units: I
C7505	Percutaneous vertebroplasties (bone biopsies included when performed), first lumbosacral and any additional cervicothoracic or lumbosacral vertebral bodies, unilateral or bilateral injection, inclusive of all imaging guidance	1/1/2023	Max Units: I
C7506	Arthrodesis, interphalangeal joints, with or without internal fixation	1/1/2023	Max Units: I
C7507	Percutaneous vertebral augmentations, first thoracic and any additional thoracic or lumbar vertebral bodies, including cavity creations (fracture reductions and bone biopsies included when performed) using mechanical device (eg, kyphoplasty), unilateral or bilateral cannulations, inclusive of all imaging guidance	1/1/2023	Max Units: I
C7508	Percutaneous vertebral augmentations, first lumbar and any additional thoracic or lumbar vertebral bodies, including cavity creations (fracture reductions and bone biopsies included when performed) using mechanical device (eg, kyphoplasty), unilateral or bilateral cannulations, inclusive of all imaging guidance	1/1/2023	Max Units: I
C7534	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(ies), unilateral, with atherectomy, includes angioplasty within the same vessel, when performed with intravascular ultrasound (initial noncoronary vessel) during diagnostic evaluation and/or therapeutic intervention, including radiological supervision and interpretation	1/1/2023	Max Units: I
C7535	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(ies), unilateral, with transluminal stent placement(s), includes angioplasty within the same vessel, when performed, with intravascular ultrasound (initial noncoronary vessel) during diagnostic evaluation and/or therapeutic intervention, including radiological supervision and interpretation	1/1/2023	Max Units: I
C7537	Insertion of new or replacement of permanent pacemaker with atrial transvenous electrode(s), with insertion of pacing electrode, cardiac venous system, for left ventricular pacing, at time of insertion of implantable debribrillator or pacemake pulse generator (eg, for upgrade to dual chamber system)	1/1/2023	Max Units: I
C7538	Insertion of new or replacement of permanent pacemaker with ventricular transvenous electrode(s), with insertion of pacing electrode, cardiac venous system, for left ventricular pacing, at time of insertion of implantable defribrillator or pacemaker pulse generator (eg, for upgrade to dual chamber system)	1/1/2023	Max Units: I

			-
C7539	Insertion of new or replacement of permanent pacemaker with atrial and ventricular transvenous electrode(s), with insertion of pacing electrode, cardiac venous system, for left ventricular pacing, at time of insertion of implantable defibrillator or pacemaker pulse generator (eg, for upgrade to dual chamber system)	1/1/2023	Max Units: I
C7540	Removal of permanent pacemaker pulse generator with replacement of pacemaker pulse generator, dual lead system, with insertion of pacing electrode, cardiac venous system, for left ventricular pacing, at time of insertion of implantable defibrillator or pacemaker pulse generator (eg, for upgrade to dual chamber system)	1/1/2023	Max Units: I
C7541	Diagnostic endoscopic retrograde cholangiopancreatography (ercp), including collection of specimen(s) by brushing or washing, when performed, with endoscopic cannulation of papilla with direct visualization of pancreatic/common bile ducts(s)		Max Units: I
C7542	Endoscopic retrograde cholangiopancreatography (ercp) with biopsy, single or multiple, with endoscopic cannulation of papilla with direct visualization of pancreatic/common bile ducts(s)	1/1/2023	Max Units: I
C7543	Endoscopic retrograde cholangiopancreatography (ercp) with sphincterotomy/papillotomy, with endoscopic cannulation of papilla with direct visualization of pancreatic/common bile ducts(s)	1/1/2023	Max Units: I
C7544	Endoscopic retrograde cholangiopancreatography (ercp) with removal of calculi/debris from biliary/pancreatic duct(s), with endoscopic cannulation of papilla with direct visualization of pancreatic/common bile ducts(s)	1/1/2023	Max Units: I
C7555	Thyroidectomy, total or complete with parathyroid autotransplantation	1/1/2023	Max Units: I
C9143	Cocaine hydrochloride nasal solution (numbrino), I mg	1/1/2023	Min age: 18 Max Units: 160
G0316	Prolonged hospital inpatient or observation care evaluation and management service(s) beyond the total time for the primary service (when the primary service has been selected using time on the date of the primary service); each additional 15 minutes by the physician or qualified healthcare professional, with or without direct patient contact (list separately in addition to cpt codes 99223, 99233, and 99236 for hospital inpatient or observation care evaluation and management services). (do not report G0316 on the same date of service as other prolonged services for evaluation and management 99358, 99359, 99418, 99415, 99416). (do not report G0316 for any time unit less than 15 minutes)	1/1/2023	Max Units: 2
G0317	Prolonged nursing facility evaluation and management service(s) beyond the total time for the primary service (when the primary service has been selected using time on the date of the primary service); each additional 15 minutes by the physician or qualified healthcare professional, with or without direct patient contact (list separately in addition to cpt codes 99306, 99310 for nursing facility evaluation and management services). (do not report G0317 on the same date of service as other prolonged services for evaluation and management 99358, 99359, 99418). (do not report G0317 for any time unit less than 15 minutes)	1/1/2023	Max Units: 2

G0318	Prolonged home or residence evaluation and management service(s) beyond the total time for the primary service (when the primary service has been selected using time on the date of the primary service); each	1/1/2023	Max Units: 2
	additional 15 minutes by the physician or qualified healthcare professional, with or without direct patient		
	contact (list separately in addition to cpt codes 99345, 99350 for home or residence evaluation and management services). (do not report G0318 on the same date of service as other prolonged services for		
	evaluation and management 99358, 99359, 99417). (do not report G0318 for any time unit less than 15		
	minutes)		
G3002	Chronic pain management and treatment, monthly bundle including, diagnosis; assessment and monitoring;	1/1/2023	Max Units: I
	administration of a validated pain rating scale or tool; the development, implementation, revision, and/or		
	maintenance of a person-centered care plan that includes strengths, goals, clinical needs, and desired		
	outcomes; overall treatment management; facilitation and coordination of any necessary behavioral health		
	treatment; medication management; pain and health literacy counseling; any necessary chronic pain related		
	crisis care; and ongoing communication and care coordination between relevant practitioners furnishing care,		
	e.g. physical therapy and occupational therapy, complementary and integrative approaches, and community-		
	based care, as appropriate. required initial face-to-face visit at least 30 minutes provided by a physician or		
	other qualified health professional; first 30 minutes personally provided by physician or other qualified health		
	care professional, per calendar month. (when using G3002, 30 minutes must be met or exceeded.)		
G3003	Each additional 15 minutes of chronic pain management and treatment by a physician or other qualified health	1/1/2023	Max Units: I
	care professional, per calendar month. (list separately in addition to code for G3002. when using G3003, 15		
	minutes must be met or exceeded.)		
J0134	Injection, acetaminophen (fresenius kabi) not therapeutically equivalent to j0131, 10 mg	1/1/2023	Max Units: 400
J0136	Injection, acetaminophen (b braun) not therapeutically equivalent to J0131, 10 mg	1/1/2023	Max Units: 400
J0283	Injection, amiodarone hydrochloride (nexterone), 30 mg	1/1/2023	Max Units: 70
J0611	Injection, calcium gluconate (wg critical care), per 10 mL	1/1/2023	Max Units: 15
J0689	Injection, cefazolin sodium (baxter), not therapeutically equivalent to J0690, 500 mg	1/1/2023	Max Units: 16
J0701	Injection, cefepime hydrochloride (baxter), not therapeutically equivalent to maxipime, 500 mg	1/1/2023	Max Units: 12
J0703	Injection, cefepime hydrochloride (b braun), not therapeutically equivalent to maxipime, 500 mg	1/1/2023	Max Units: 12
J0877	Injection, daptomycin (hospira), not therapeutically equivalent to J0878, 1 mg	1/1/2023	Min Age: I (one)
			Max Units: 1500
<u>J0891</u>	Injection, argatroban (accord), not therapeutically equivalent to J0883, I mg (for non-esrd use)	1/1/2023	Max Units: 1250
J0892	Injection, argatroban (accord), not therapeutically equivalent to J0884, I mg (for esrd on dialysis)	1/1/2023	Max Units: 1250
J0893	Injection, decitabine (sun pharma) not therapeutically equivalent to J0894, I mg	1/1/2023	Min age: 18
10000			Max Units: 100
J0898	Injection, argatroban (auromedics), not therapeutically equivalent to J0883, I mg (for non-esrd use)	1/1/2023	Max Units: 1250
J0899	Injection, argatroban (auromedics), not therapeutically equivalent to J0884, I mg (for esrd on dialysis)	1/1/2023	Max Units: 1250

J1574Injection, ganciclovir sodium (exela) not therapeutically equivalent to J1570, 500 mg1/1/2023Max Units: 4J1611Injection, glucagon hydrochloride (fresenius kabi), not therapeutically equivalent to J1610, per 1 mg1/1/2023Max Units: 3J1643Injection, inezolid (hospira) not therapeutically equivalent to J1644, per 1000 units1/1/2023Max Units: 50J2021Injection, inezolid (hospira) not therapeutically equivalent to J2020, 200 mg1/1/2023Max Units: 60J2184Injection, meropenem (b. braun) not therapeutically equivalent to J2185, 100 mg1/1/2023Max Units: 300J2231Injection, midazolam hydrochloride (vg critical care) not therapeutically equivalent to J2250, per 1 mg1/1/2023Max Units: 300J2231Injection, moxifloxacin (fresenius kabi) not therapeutically equivalent to J2270, up to 10 mg1/1/2023Max Units: 30J2231Injection, naloxone hydrochloride (zimhi), 1 mg1/1/2023Max Units: 16J2401Injection, chloroprocaine hydrochloride, per 30 ml1/1/2023Max Units: 10J2402Injection, tigecycline (accord) not therapeutically equivalent to J3243, 1 mg1/1/2023Max Units: availableJ2404Injection, tigecycline (accord) not therapeutically equivalent to J3370, 500 mg1/1/2023Max Units: 12J3372Injection, vancomycin hcl (xellia) not therapeutically equivalent to J3470, 500 mg1/1/2023Max Units: 12J3372Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to J9041, 0.1 mg1/1/2023Max Units: 12J9048Injection, bortezomib (fresenius kabi), not	JI 456	Injection, fosaprepitant (teva), not therapeutically equivalent to J1453, 1 mg	1/1/2023	Max Units: 150
J1643Injection, heparin sodium (pfizer), not therapeutically equivalent to J1644, per 1000 units1/1/2023Max Units: 50J2021Injection, linezolid (hospira) not therapeutically equivalent to J2020, 200 mg1/1/2023Max Units: 6J2184Injection, meropenem (b. braun) not therapeutically equivalent to J2185, 100 mg1/1/2023Max Units: 60J2247Injection, micafungin sodium (par pharm) not therapeutically equivalent to J228, 1 mg1/1/2023Max Units: 300J2251Injection, midazolam hydrochloride (wg critical care) not therapeutically equivalent to J2270, up to 10 mg1/1/2023Max Units: 30J2272Injection, morphine sulfate (fresenius kabi) not therapeutically equivalent to J2280, 100 mg1/1/2023Max Units: 8J211Injection, naloxone hydrochloride (zimhi), 1 mg1/1/2023Max Units: 10Max Units: 10J2401Injection, chloroprocaine hydrochloride (clorotekal), per 1 mg1/1/2023No restrictions No Max Units: availableJ2402Injection, tigecycline (accord) not therapeutically equivalent to J3243, 1 mg1/1/2023Max Units: 200J3371Injection, vancomycin hcl (mylan) not therapeutically equivalent to J3370, 500 mg1/1/2023Max Units: 12J3372Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to J3370, 500 mg1/1/2023Max Units: 12J9046Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to J3370, 500 mg1/1/2023Max Units: 12Max Units: 351/1/2023Max Units: 12Max Units: 12	JI 574	Injection, ganciclovir sodium (exela) not therapeutically equivalent to J1570, 500 mg	1/1/2023	Max Units: 4
J201Injection, linezolid (hospira) not therapeutically equivalent to J2020, 200 mg1/1/2023Max Units: 6J2184Injection, meropenem (b. braun) not therapeutically equivalent to J2185, 100 mg1/1/2023Max Units: 60J2247Injection, micafungin sodium (par pharm) not therapeutically equivalent to J2185, 100 mg1/1/2023Max Units: 300J2251Injection, midazolam hydrochloride (wg critical care) not therapeutically equivalent to J2250, per 1 mg1/1/2023Max Units: 30J2272Injection, morphine sulfate (fresenius kabi) not therapeutically equivalent to J2270, up to 10 mg1/1/2023Max Units: 15J2281Injection, moxifloxacin (fresenius kabi) not therapeutically equivalent to J2280, 100 mg1/1/2023Max Units: 8J2311Injection, naloxone hydrochloride (zimhi), 1 mg1/1/2023Max Units: 10J2402Injection, chloroprocaine hydrochloride (clorotekal), per 1 mg1/1/2023No restrictions No Max Units availableJ2402Injection, tigecycline (accord) not therapeutically equivalent to J3270, 500 mg1/1/2023Max Units: 200J3371Injection, vancomycin hcl (mylan) not therapeutically equivalent to J3370, 500 mg1/1/2023Max Units: 12J3724Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to J3370, 500 mg1/1/2023Max Units: 12J9046Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to J9041, 0.1 mg1/1/2023Min age: 18 Max Units: 35	J1611	Injection, glucagon hydrochloride (fresenius kabi), not therapeutically equivalent to J1610, per 1 mg	1/1/2023	Max Units: 3
J2184Injection, meropenem (b. braun) not therapeutically equivalent to J2185, 100 mg1/1/2023Max Units: 60J2247Injection, micafungin sodium (par pharm) not therapeutically equivalent to J2248, 1 mg1/1/2023Max Units: 300J2251Injection, midazolam hydrochloride (wg critical care) not therapeutically equivalent to J2250, per 1 mg1/1/2023Max Units: 30J2272Injection, morphine sulfate (fresenius kabi) not therapeutically equivalent to J2270, up to 10 mg1/1/2023Max Units: 15J2281Injection, moxifloxacin (fresenius kabi) not therapeutically equivalent to J2280, 100 mg1/1/2023Max Units: 8J2311Injection, naloxone hydrochloride (zimhi), 1 mg1/1/2023Max Units: 10J2401Injection, chloroprocaine hydrochloride, per 30 ml1/1/2023No restrictions No Max Units availableJ2402Injection, tigecycline (accord) not therapeutically equivalent to J3243, 1 mg1/1/2023Max Units: 200J3371Injection, vancomycin hcl (mylan) not therapeutically equivalent to J3370, 500 mg1/1/2023Max Units: 12J3404Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to J3370, 500 mg1/1/2023Max Units: 12J372Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to J3370, 500 mg1/1/2023Max Units: 12J9046Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to J3070, 500 mg1/1/2023Max Units: 13Max Units: 35Max Units: 35Max Units: 35	JI 643	Injection, heparin sodium (pfizer), not therapeutically equivalent to J1644, per 1000 units	1/1/2023	Max Units: 50
j2247Injection, micafungin sodium (par pharm) not therapeutically equivalent to j2248, 1 mgI/1/2023Max Units: 300j2251Injection, midazolam hydrochloride (wg critical care) not therapeutically equivalent to j2250, per 1 mgI/1/2023Max Units: 30j2272Injection, morphine sulfate (fresenius kabi) not therapeutically equivalent to j2270, up to 10 mgI/1/2023Max Units: 15j2281Injection, moxifloxacin (fresenius kabi) not therapeutically equivalent to j2280, 100 mgI/1/2023Max Units: 8j2311Injection, naloxone hydrochloride (zimhi), 1 mgI/1/2023Max Units: 10j2401Injection, chloroprocaine hydrochloride, per 30 mlI/1/2023No restrictions No Max Units availablej2402Injection, chloroprocaine hydrochloride (clorotekal), per 1 mgI/1/2023No restrictions No Max Units availablej3244Injection, tigecycline (accord) not therapeutically equivalent to j3243, 1 mgI/1/2023Max Units: 200j3371Injection, vancomycin hcl (mylan) not therapeutically equivalent to j3370, 500 mgI/1/2023Max Units: 12j9046Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to j9041, 0.1 mgI/1/2023Max Units: 35	J2021	Injection, linezolid (hospira) not therapeutically equivalent to J2020, 200 mg	1/1/2023	Max Units: 6
J2251Injection, midazolam hydrochloride (wg critical care) not therapeutically equivalent to J2250, per 1 mg1/1/2023Max Units: 30J2272Injection, morphine sulfate (fresenius kabi) not therapeutically equivalent to J2270, up to 10 mg1/1/2023Max Units: 15J2281Injection, moxifloxacin (fresenius kabi) not therapeutically equivalent to J2280, 100 mg1/1/2023Max Units: 8J2311Injection, naloxone hydrochloride (zimhi), 1 mg1/1/2023Max Units: 10J2401Injection, chloroprocaine hydrochloride, per 30 ml1/1/2023No restrictions No Max Units availableJ2402Injection, chloroprocaine hydrochloride (clorotekal), per 1 mg1/1/2023No restrictions No Max Units availableJ2444Injection, tigecycline (accord) not therapeutically equivalent to J3243, 1 mg1/1/2023Max Units: 200J3371Injection, vancomycin hcl (mylan) not therapeutically equivalent to J3370, 500 mg1/1/2023Max Units: 12J3046Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to J3041, 0.1 mg1/1/2023Min age: 18 Max Units: 35	J2184	Injection, meropenem (b. braun) not therapeutically equivalent to J2185, 100 mg	1/1/2023	Max Units: 60
J2272Injection, morphine sulfate (fresenius kabi) not therapeutically equivalent to J2270, up to 10 mg1/1/2023Max Units: 15J2281Injection, moxifloxacin (fresenius kabi) not therapeutically equivalent to J2280, 100 mg1/1/2023Max Units: 8J2311Injection, naloxone hydrochloride (zimhi), 1 mg1/1/2023Max Units: 10J2401Injection, chloroprocaine hydrochloride, per 30 ml1/1/2023No restrictions No Max Units availableJ2402Injection, chloroprocaine hydrochloride (clorotekal), per 1 mg1/1/2023No restrictions No Max Units availableJ3244Injection, tigecycline (accord) not therapeutically equivalent to J3243, 1 mg1/1/2023Max Units: 200J3371Injection, vancomycin hcl (mylan) not therapeutically equivalent to J3370, 500 mg1/1/2023Max Units: 12J3372Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to J9041, 0.1 mg1/1/2023Min age: 18 Max Units: 35	J2247	Injection, micafungin sodium (par pharm) not therapeutically equivalent to J2248, I mg	1/1/2023	Max Units: 300
J2281Injection, moxifloxacin (fresenius kabi) not therapeutically equivalent to J2280, 100 mg1/1/2023Max Units: 8J2311Injection, naloxone hydrochloride (zimhi), 1 mg1/1/2023Max Units: 10J2401Injection, chloroprocaine hydrochloride, per 30 ml1/1/2023No restrictions No Max Units availableJ2402Injection, chloroprocaine hydrochloride (clorotekal), per 1 mg1/1/2023No restrictions No Max Units availableJ2402Injection, tigecycline (accord) not therapeutically equivalent to J3243, 1 mg1/1/2023No restrictions No Max Units: 200J3371Injection, vancomycin hcl (mylan) not therapeutically equivalent to J3370, 500 mg1/1/2023Max Units: 12J3372Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to J9041, 0.1 mg1/1/2023Max Units: 12Max Units: 351/1/2023Max Units: 13	J225 I	Injection, midazolam hydrochloride (wg critical care) not therapeutically equivalent to J2250, per 1 mg	1/1/2023	Max Units: 30
J2311Injection, naloxone hydrochloride (zimhi), 1 mgI/I/2023Max Units: 10J2401Injection, chloroprocaine hydrochloride, per 30 ml1/1/2023No restrictions No Max Units availableJ2402Injection, chloroprocaine hydrochloride (clorotekal), per 1 mg1/1/2023No restrictions No Max Units availableJ2402Injection, tigecycline (accord) not therapeutically equivalent to J3243, 1 mg1/1/2023No restrictions No Max Units availableJ3244Injection, vancomycin hcl (mylan) not therapeutically equivalent to J3270, 500 mg1/1/2023Max Units: 200J3371Injection, vancomycin hcl (xellia) not therapeutically equivalent to J3370, 500 mg1/1/2023Max Units: 12J3372Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to J9041, 0.1 mg1/1/2023Min age: 18 Max Units: 35	J2272	Injection, morphine sulfate (fresenius kabi) not therapeutically equivalent to J2270, up to 10 mg	1/1/2023	Max Units: 15
J2401Injection, chloroprocaine hydrochloride, per 30 ml1/1/2023No restrictions No Max Units availableJ2402Injection, chloroprocaine hydrochloride (clorotekal), per 1 mg1/1/2023No restrictions No Max Units availableJ3244Injection, tigecycline (accord) not therapeutically equivalent to J3243, 1 mg1/1/2023No restrictions No Max Units: availableJ3271Injection, vancomycin hcl (mylan) not therapeutically equivalent to J3370, 500 mg1/1/2023Max Units: 12J3372Injection, vancomycin hcl (xellia) not therapeutically equivalent to J3370, 500 mg1/1/2023Max Units: 12J9046Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to J9041, 0.1 mg1/1/2023Min age: 18 Max Units: 35	J2281	Injection, moxifloxacin (fresenius kabi) not therapeutically equivalent to J2280, 100 mg	1/1/2023	Max Units: 8
J2402Injection, chloroprocaine hydrochloride (clorotekal), per I mgI/I/2023No Max Units availableJ2402Injection, chloroprocaine hydrochloride (clorotekal), per I mgI/I/2023No restrictions No Max Units availableJ3244Injection, tigecycline (accord) not therapeutically equivalent to J3243, I mgI/I/2023Max Units: 200J3371Injection, vancomycin hcl (mylan) not therapeutically equivalent to J3370, 500 mgI/I/2023Max Units: 12J3372Injection, vancomycin hcl (xellia) not therapeutically equivalent to J3370, 500 mgI/I/2023Max Units: 12J9046Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to J9041, 0.1 mgI/I/2023Min age: 18 Max Units: 35	J2311	Injection, naloxone hydrochloride (zimhi), 1 mg	1/1/2023	Max Units: 10
J2402Injection, chloroprocaine hydrochloride (clorotekal), per I mgI/I/2023availableJ3244Injection, tigecycline (accord) not therapeutically equivalent to J3243, I mgI/I/2023Max Units: availableJ3271Injection, vancomycin hcl (mylan) not therapeutically equivalent to J3370, 500 mgI/I/2023Max Units: 12J3372Injection, vancomycin hcl (xellia) not therapeutically equivalent to J3370, 500 mgI/I/2023Max Units: 12J9046Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to J9041, 0.1 mgI/I/2023Min age: 18 Max Units: 35	J2401	Injection, chloroprocaine hydrochloride, per 30 ml	1/1/2023	No restrictions
J2402Injection, chloroprocaine hydrochloride (clorotekal), per I mgI/I/2023No restrictions No Max Units availableJ3244Injection, tigecycline (accord) not therapeutically equivalent to J3243, I mgI/I/2023Max Units: 200J3371Injection, vancomycin hcl (mylan) not therapeutically equivalent to J3370, 500 mgI/I/2023Max Units: 12J3372Injection, vancomycin hcl (xellia) not therapeutically equivalent to J3370, 500 mgI/I/2023Max Units: 12J9046Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to J9041, 0.1 mgI/I/2023Min age: 18 Max Units: 35				No Max Units
J3244Injection, tigecycline (accord) not therapeutically equivalent to J3243, I mgI/I/2023No Max Units availableJ3371Injection, vancomycin hcl (mylan) not therapeutically equivalent to J3370, 500 mgI/I/2023Max Units: 12J3372Injection, vancomycin hcl (xellia) not therapeutically equivalent to J3370, 500 mgI/I/2023Max Units: 12J9046Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to J9041, 0.1 mgI/I/2023Min age: 18 Max Units: 35				available
J3244Injection, tigecycline (accord) not therapeutically equivalent to J3243, I mgI/I/2023Max Units: 200J3371Injection, vancomycin hcl (mylan) not therapeutically equivalent to J3370, 500 mgI/I/2023Max Units: 12J3372Injection, vancomycin hcl (xellia) not therapeutically equivalent to J3370, 500 mgI/I/2023Max Units: 12J9046Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to J9041, 0.1 mgI/I/2023Min age: 18 Max Units: 35	J2402	Injection, chloroprocaine hydrochloride (clorotekal), per I mg	1/1/2023	No restrictions
J3244Injection, tigecycline (accord) not therapeutically equivalent to J3243, I mgI/I/2023Max Units: 200J3371Injection, vancomycin hcl (mylan) not therapeutically equivalent to J3370, 500 mgI/I/2023Max Units: 12J3372Injection, vancomycin hcl (xellia) not therapeutically equivalent to J3370, 500 mgI/I/2023Max Units: 12J9046Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to J9041, 0.1 mgI/I/2023Min age: 18 Max Units: 35				
J3371Injection, vancomycin hcl (mylan) not therapeutically equivalent to J3370, 500 mg1/1/2023Max Units: 12J3372Injection, vancomycin hcl (xellia) not therapeutically equivalent to J3370, 500 mg1/1/2023Max Units: 12J9046Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to J9041, 0.1 mg1/1/2023Min age: 18 Max Units: 35				
J3372Injection, vancomycin hcl (xellia) not therapeutically equivalent to J3370, 500 mg1/1/2023Max Units: 12J9046Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to J9041, 0.1 mg1/1/2023Min age: 18 Max Units: 35	-			
J9046Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to J9041, 0.1 mg1/1/2023Min age: 18 Max Units: 35				Max Units: 12
Max Units: 35	-			
	J9046	Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to J9041, 0.1 mg	1/1/2023	•
J9048 Injection, bortezomib (fresenius kabi), not therapeutically equivalent to J9041, 0.1 mg I/1/2023 Min age: 18				
	J9048	Injection, bortezomib (fresenius kabi), not therapeutically equivalent to J9041, 0.1 mg	1/1/2023	•
Max Units: 35				
J9049Injection, bortezomib (hospira), not therapeutically equivalent to J9041, 0.1 mgI/1/2023Min age: 18	J9049	Injection, bortezomib (hospira), not therapeutically equivalent to J9041, 0.1 mg	1/1/2023	•
Max Units: 35				
J9314Injection, pemetrexed (teva) not therapeutically equivalent to J9305, 10 mgI/1/2023Max Units: 150	J9314	Injection, pemetrexed (teva) not therapeutically equivalent to J9305, 10 mg	1/1/2023	Max Units: 150

*Covid Related Code

Table 2 - CDT©

Dental	Description	Effective Date
Code		
D0372	Intraoral tomosynthesis - comprehensive series of radiographic images	1/1/2023
D0373	Intraoral tomosynthesis - bitewing radiographic image	1/1/2023
D0374	Intraoral tomosynthesis - periapical radiographic image	1/1/2023
D0387	Intraoral tomosynthesis - comprehensive series of radiographic images - image capture only	1/1/2023
D0388	Intraoral tomosynthesis - bitewing radiographic image - image capture only	1/1/2023
D0389	Intraoral tomosynthesis - periapical radiographic image - image capture only	1/1/2023
D0801	3d dental surface scan - direct	1/1/2023
D0802	3d dental surface scan - indirect	1/1/2023
D0803	3d facial surface scan - direct	1/1/2023
D0804	3d facial surface scan - indirect	1/1/2023
D1781	Vaccine administration - human papillomavirus - dose I	1/1/2023
D1782	Vaccine administration - human papillomavirus - dose 2	1/1/2023
D1783	Vaccine administration - human papillomavirus - dose 3	1/1/2023
D4286	Removal of non-resorbable barrier	1/1/2023
D6105	Removal of implant body not requiring bone removal or flap elevation	1/1/2023
D6106	Guided tissue regeneration - resorbable barrier, per implant	1/1/2023
D6107	Guided tissue regeneration - non-resorbable barrier, per implant	1/1/2023
D6197	Replacement of restorative material used to close an access opening of a screw-retained implant supported prosthesis, per	1/1/2023
	implant	
D7509	Marsupialization of odontogenic cyst	1/1/2023
D7956	Guided tissue regeneration, edentulous area - resorbable barrier, per site	1/1/2023
D7957	Guided tissue regeneration, edentulous area - non-resorbable barrier, per site	1/1/2023
D9953	Reline custom sleep apnea appliance (indirect)	1/1/2023
G0330	Facility services for dental rehabilitation procedure(s) performed on a patient who requires monitored anesthesia (e.g.,	1/1/2023
	general, intravenous sedation (monitored anesthesia care) and use of an operating room	

Table 3 – ICD-10-CM Codes

ICD-10-CM Code	Description	Effective Date	Special Billing Information
T74.AIXA	Adult financial abuse, confirmed, initial encounter	4/1/2023	Min age: 15; Both Sexes
T74.AIXD	Adult financial abuse, confirmed, subsequent encounter	4/1/2023	Min age: 15; Both Sexes
T74.AIXS	Adult financial abuse, confirmed, sequela	4/1/2023	Min age: 15; Both Sexes
T74.A2XA	Child financial abuse, confirmed, initial encounter	4/1/2023	Max age: 18; Both Sexes
T74.A2XD	Child financial abuse, confirmed, subsequent encounter	4/1/2023	Max age: 18; Both Sexes
T74.A2XS	Child financial abuse, confirmed, sequela	4/1/2023	Max age: 18; Both Sexes
T76.AIXA	Adult financial abuse, suspected, initial encounter	4/1/2023	Min age: 15; Both Sexes
T76.AIXD	Adult financial abuse, suspected, subsequent encounter	4/1/2023	Min age: 15; Both Sexes
T76.AIXS	Adult financial abuse, suspected, sequela	4/1/2023	Min age: 15; Both Sexes
T76.A2XA	Child financial abuse, suspected, initial encounter	4/1/2023	Max age: 18; Both Sexes
T76.A2XD	Child financial abuse, suspected, subsequent encounter	4/1/2023	Max age: 18; Both Sexes
T76.A2XS	Child financial abuse, suspected, sequela	4/1/2023	Max age: 18; Both Sexes
Y07.010	Husband, current, perpetrator of maltreatment and neglect	4/1/2023	Min age: 15; Male Only
Y07.011	Husband, former, perpetrator of maltreatment and neglect	4/1/2023	Min age: 15; Male Only
Y07.020	Wife, current, perpetrator of maltreatment and neglect	4/1/2023	Female Only
Y07.021	Wife, former, perpetrator of maltreatment and neglect	4/1/2023	Female Only
Y07.030	Male partner, current, perpetrator of maltreatment and neglect	4/1/2023	Both Sexes
Y07.031	Male partner, former, perpetrator of maltreatment and neglect	4/1/2023	Both Sexes

Y07.040	Female partner, current, perpetrator of maltreatment and neglect	4/1/2023	Both Sexes
Y07.041	Female partner, former, perpetrator of maltreatment and neglect	4/1/2023	Both Sexes
Y07.050	Non-binary partner, current, perpetrator of maltreatment and neglect	4/1/2023	Both Sexes
Y07.051	Non-binary partner, former, perpetrator of maltreatment and neglect	4/1/2023	Both Sexes
Y07.44	Child, perpetrator of maltreatment and neglect	4/1/2023	Both Sexes
Y07.45	Grandchild, perpetrator of maltreatment and neglect	4/1/2023	Both Sexes
Y07.46	Grandparent, perpetrator of maltreatment and neglect	4/1/2023	Both Sexes
Y07.47	Parental sibling, perpetrator of maltreatment and neglect	4/1/2023	Both Sexes
Y07.54	Acquaintance or friend, perpetrator of maltreatment and neglect	4/1/2023	Both Sexes
Z58.81	Basic services unavailable in physical environment	4/1/2023	Both Sexes
Z58.89	Other problems related to physical environment	4/1/2023	Both Sexes
Z62.814	Personal history of child financial abuse	4/1/2023	Requires Claim Review
Z62.815	Personal history of intimate partner abuse in childhood	4/1/2023	Requires Claim Review
Z91.413	Personal history of adult financial abuse	4/1/2023	Min age: 15; non-specific code
Z91.414	Personal history of adult intimate partner abuse	4/1/2023	Min age: 15; non-specific code

Table 4 – ICD-10-PCS Codes

ICD-10-PCS Code	Description	Effective Date
02LW0DJ	Occlusion of Thoracic Aorta, Descending with Intraluminal Device, Temporary, Open Approach	4/1/2023
04L00DJ	Occlusion of Abdominal Aorta with Intraluminal Device, Temporary, Open Approach	4/1/2023
0P530Z3	Destruction of Cervical Vertebra using Laser Interstitial Thermal Therapy, Open Approach	4/1/2023
0P533Z3	Destruction of Cervical Vertebra using Laser Interstitial Thermal Therapy, Percutaneous Approach	4/1/2023
0P534Z3	Destruction of Cervical Vertebra using Laser Interstitial Thermal Therapy, Percutaneous Endoscopic Approach	4/1/2023
0P540Z3	Destruction of Thoracic Vertebra using Laser Interstitial Thermal Therapy, Open Approach	4/1/2023
0P543Z3	Destruction of Thoracic Vertebra using Laser Interstitial Thermal Therapy, Percutaneous Approach	4/1/2023
0P544Z3	Destruction of Thoracic Vertebra using Laser Interstitial Thermal Therapy, Percutaneous Endoscopic Approach	4/1/2023
0Q500Z3	Destruction of Lumbar Vertebra using Laser Interstitial Thermal Therapy, Open Approach	4/1/2023

0Q503Z3	Destruction of Lumbar Vertebra using Laser Interstitial Thermal Therapy, Percutaneous Approach	4/1/2023
0Q504Z3	Destruction of Lumbar Vertebra using Laser Interstitial Thermal Therapy, Percutaneous Endoscopic Approach	4/1/2023
0Q510Z3	Destruction of Sacrum using Laser Interstitial Thermal Therapy, Open Approach	4/1/2023
0Q513Z3	Destruction of Sacrum using Laser Interstitial Thermal Therapy, Percutaneous Approach	4/1/2023
0Q514Z3	Destruction of Sacrum using Laser Interstitial Thermal Therapy, Percutaneous Endoscopic Approach	4/1/2023
302A3H0	Transfusion of Autologous Whole Blood into Bone Marrow, Percutaneous Approach	4/1/2023
302A3HI	Transfusion of Nonautologous Whole Blood into Bone Marrow, Percutaneous Approach	4/1/2023
302A3J0	Transfusion of Autologous Serum Albumin into Bone Marrow, Percutaneous Approach	4/1/2023
302A3JI	Transfusion of Nonautologous Serum Albumin into Bone Marrow, Percutaneous Approach	4/1/2023
302A3K0	Transfusion of Autologous Frozen Plasma into Bone Marrow, Percutaneous Approach	4/1/2023
302A3KI	Transfusion of Nonautologous Frozen Plasma into Bone Marrow, Percutaneous Approach	4/1/2023
302A3L0	Transfusion of Autologous Fresh Plasma into Bone Marrow, Percutaneous Approach	4/1/2023
302A3LI	Transfusion of Nonautologous Fresh Plasma into Bone Marrow, Percutaneous Approach	4/1/2023
302A3N0	Transfusion of Autologous Red Blood Cells into Bone Marrow, Percutaneous Approach	4/1/2023
302A3NI	Transfusion of Nonautologous Red Blood Cells into Bone Marrow, Percutaneous Approach	4/1/2023
302A3P0	Transfusion of Autologous Frozen Red Cells into Bone Marrow, Percutaneous Approach	4/1/2023
302A3PI	Transfusion of Nonautologous Frozen Red Cells into Bone Marrow, Percutaneous Approach	4/1/2023
302A3R0	Transfusion of Autologous Platelets into Bone Marrow, Percutaneous Approach	4/1/2023
302A3RI	Transfusion of Nonautologous Platelets into Bone Marrow, Percutaneous Approach	4/1/2023
XW013G6	Introduction of REGN-COV2 Monoclonal Antibody into Subcutaneous Tissue, Percutaneous Approach, New Technology	4/1/2023
	Group 6	
XW0DXK8	Introduction of Sabizabulin into Mouth and Pharynx, External Approach, New Technology Group 8	4/1/2023
XW0G7K8	Introduction of Sabizabulin into Upper GI, Via Natural or Artificial Opening, New Technology Group 8	4/1/2023
XW0H7K8	Introduction of Sabizabulin into Lower GI, Via Natural or Artificial Opening, New Technology Group 8	4/1/2023
XW133J8	Transfusion of Exagamglogene Autotemcel into Peripheral Vein, Percutaneous Approach, New Technology Group 8	4/1/2023
XW143J8	Transfusion of Exagamglogene Autotemcel into Central Vein, Percutaneous Approach, New Technology Group 8	4/1/2023

Desc	Effective Date
Group I oxygen coverage criteria met	1/1/2023
Group 2 oxygen coverage criteria met	1/1/2023
Group 3 oxygen coverage criteria met	1/1/2023
	Group I oxygen coverage criteria met Group 2 oxygen coverage criteria met

Table 6 – Codes that require a Pre-Pay or Post-Pay claim review.

Code	Desc	Effective Date	Special Billing Information
22860	Total disc arthroplasty (artificial disc), anterior approach, including discectomy to prepare interspace (other than for decompression); second interspace, lumbar (List separately in addition to code for primary procedure)	1/1/2023	PA Required
69728	Removal, entire osseointegrated implant, skull; with magnetic transcutaneous attachment to external speech processor, outside the mastoid and involving a bony defect greater than or equal to 100 sq mm surface area of bone deep to the outer cranial cortex	1/1/2023	PA Required Max Units: I
69729	Implantation, osseointegrated implant, skull; with magnetic transcutaneous attachment to external speech processor, outside of the mastoid and resulting in removal of greater than or equal to 100 sq mm surface area of bone deep to the outer cranial cortex	1/1/2023	PA Required Max Units: I
69730	Replacement of cochlear stimulating system outside mastoid bone of skull with magnetic attachment to external speech processor	1/1/2023	PA Required Max Units: I
0742T	Absolute quantitation of myocardial blood flow (AQMBF), single-photon emission computed tomography (SPECT), with exercise or pharmacologic stress, and at rest, when performed (List separately in addition to code for primary procedure)	1/1/2023	PA Required Max Units: I
0743T	Bone strength and fracture risk using finite element analysis of functional data and bone-mineral density, with concurrent vertebral fracture assessment, utilizing data from a computed tomography scan, retrieval and transmission of the scan data, measurement of bone strength and bone mineral density and classification of any vertebral fractures, with overall fracture risk assessment, interpretation and report	1/1/2023	PA Required Max Units: I
0749T	Bone strength and fracture-risk assessment using digital X-ray radiogrammetry-bone mineral density (DXR-BMD) analysis of bone mineral density (BMD) utilizing data from a digital X ray, retrieval and transmission of digital X ray data, assessment of bone strength and fracture-risk and BMD, interpretation and report;	1/1/2023	PA Required
0750T	Bone strength and fracture-risk assessment using digital X-ray radiogrammetry-bone mineral density (DXR-BMD) analysis of bone mineral density (BMD) utilizing data from a digital X ray, retrieval and transmission of digital X ray data, assessment of bone strength and fracture-risk and BMD, interpretation and report; with single-view digital X-ray examination of the hand taken for the purpose of DXR-BMD	1/1/2023	PA Required
075IT	Digitization of glass microscope slides for level II, surgical pathology, gross and microscopic examination (List separately in addition to code for primary procedure)	1/1/2023	PA Required
0752T	Digitization of glass microscope slides for level III, surgical pathology, gross and microscopic examination (List separately in addition to code for primary procedure)	1/1/2023	PA Required
0753T	Digitization of glass microscope slides for level IV, surgical pathology, gross and microscopic examination (List separately in addition to code for primary procedure)	1/1/2023	PA Required
0754T	Digitization of glass microscope slides for level V, surgical pathology, gross and microscopic examination (List separately in addition to code for primary procedure)	1/1/2023	PA Required

0755T	Digitization of glass microscope slide for level VI, surgical pathology, gross and microscopic examination (List	1/1/2023	PA Required
•••••	separately in addition to code for primary procedure)	.,	
0756T	Digitization of glass microscope slides for special stain, including interpretation and report, group I, for microorganisms (eg, acid fast, methenamine silver) (List separately in addition to code for primary procedure)	1/1/2023	PA Required
0757T	Digitization of glass microscope slides for special stain, including interpretation and report, group II, all other (eg, iron, trichrome), except stain for microorganisms, stains for enzyme constituents, or immunocytochemistry and immunohistochemistry (List separately in addition to code for primary procedure)	1/1/2023	PA Required
0758T	Digitization of glass microscope slides for special stain, including interpretation and report, histochemical stain on frozen tissue block (List separately in addition to code for primary procedure)	1/1/2023	PA Required
0759T	Digitization of glass microscope slides for special stain, including interpretation and report, group III, for enzyme constituents (List separately in addition to code for primary procedure)	1/1/2023	PA Required
0760T	Digitization of glass microscope slides for immunohistochemistry or immunocytochemistry, per specimen, initial single antibody stain procedure (List separately in addition to code for primary procedure)	1/1/2023	PA Required
076IT	Digitization of glass microscope slides for immunohistochemistry or immunocytochemistry, per specimen, each additional single antibody stain procedure (List separately in addition to code for primary procedure)	1/1/2023	PA Required
0762T	Digitization of glass microscope slides for immunohistochemistry or immunocytochemistry, per specimen, each multiplex antibody stain procedure (List separately in addition to code for primary procedure)	1/1/2023	PA Required
0763T	Digitization of glass microscope slides for morphometric analysis, tumor immunohistochemistry (eg, Her-2/neu, estrogen receptor/progesterone receptor), quantitative or semiquantitative, per specimen, each single antibody stain procedure, manual (List separately in addition to code for primary procedure)	1/1/2023	PA Required
0764T	Assistive algorithmic electrocardiogram risk-based assessment for cardiac dysfunction (eg, low-ejection fraction, pulmonary hypertension, hypertrophic cardiomyopathy); related to concurrently performed electrocardiogram (List separately in addition to code for primary procedure)	1/1/2023	PA Required Max Units: I
0765T	Assistive algorithmic electrocardiogram risk-based assessment for cardiac dysfunction (eg, low-ejection fraction, pulmonary hypertension, hypertrophic cardiomyopathy); related to previously performed electrocardiogram	1/1/2023	PA Required Max Units: I
A4239	Supply allowance for non-adjunctive, non-implanted continuous glucose monitor (cgm), includes all supplies and accessories, I month supply = I unit of service	1/1/2023	PA Required Max Units: I
E2103	Non-adjunctive, non-implanted continuous glucose monitor or receiver	1/1/2023	PA Required Max Units: I
J0225	Injection, vutrisiran, I mg	1/1/2023	PA Required Max Units: 25
J1954	Injection, leuprolide acetate for depot suspension (lutrate), 7.5 mg	1/1/2023	Suspend for Claim Review Max Units: 6

Injection, risankizumab-rzaa, intravenous, 1 mg	1/1/2023	PA Required Max Units: 600
Injection, fulvestrant (teva) not therapeutically equivalent to J9395, 25 mg	1/1/2023	Suspend for Claim Review Max Units: 20
Injection, fulvestrant (fresenius kabi) not therapeutically equivalent to J9395, 25 mg	1/1/2023	Suspend for Claim Review Max Units: 20
Injection, bevacizumab-maly, biosimilar, (alymsys), 10 mg	1/1/2023	PA Required Min age: 18 Max Units: 270
	Injection, fulvestrant (teva) not therapeutically equivalent to J9395, 25 mg Injection, fulvestrant (fresenius kabi) not therapeutically equivalent to J9395, 25 mg	Injection, fulvestrant (teva) not therapeutically equivalent to J9395, 25 mg I/1/2023 Injection, fulvestrant (fresenius kabi) not therapeutically equivalent to J9395, 25 mg I/1/2023

Table 7 – Non-covered codes

Table i	
Code	Description
30469	Repair of nasal valve collapse with low energy, temperature-controlled (i.e., radiofrequency) subcutaneous/submucosal remodeling
36836	Percutaneous arteriovenous fistula creation, upper extremity, single access of both the peripheral artery and peripheral vein, including fistula maturation procedures (eg, transluminal balloon angioplasty, coil embolization) when performed, including all vascular access, imaging guidance and radiologic supervision and interpretation
36837	Percutaneous arteriovenous fistula creation, upper extremity, separate access sites of the peripheral artery and peripheral vein, including fistula maturation procedures (eg, transluminal balloon angioplasty, coil embolization) when performed, including all vascular access, imaging guidance and radiologic supervision and interpretation
43290	Esophagogastroduodenoscopy, flexible, transoral; with deployment of intragastric bariatric balloon
43291	Esophagogastroduodenoscopy, flexible, transoral; with removal of intragastric bariatric balloon(s)
81418	Genomic sequence analysis panel of at least 6 genes associated with drug metabolism
81441	Inherited bone marrow failure syndromes (IBMFS) (eg, Fanconi anemia, dyskeratosis congenita, Diamond-Blackfan anemia, Shwachman-Diamond syndrome, GATA2 deficiency syndrome, congenital amegakaryocytic thrombocytopenia) sequence analysis panel, must include sequencing of at least 30 genes, including BRCA2, BRIPI, DKCI, FANCA, FANCB, FANCC, FANCD2, FANCE, FANCF, FANCG, FANCI, FANCL, GATAI, GATA2, MPL, NHP2, NOPI0, PALB2, RAD5IC, RPLII, RPL35A, RPL5, RPS10, RPS19, RPS24, RPS26, RPS7, SBDS, TERT, and TINF2
81449	Targeted genomic sequence analysis panel, solid organ neoplasm, 5-50 genes (eg, ALK, BRAF, CDKN2A, EGFR, ERBB2, KIT, KRAS, MET, NRAS, PDGFRA, PDGFRB, PGR, PIK3CA, PTEN, RET), interrogation for sequence variants and copy number variants or rearrangements, if performed; RNA analysis

81451	Targeted genomic sequence analysis panel, hematolymphoid neoplasm or disorder, 5-50 genes (eg, BRAF, CEBPA, DNMT3A, EZH2, FLT3, IDH1,
	IDH2, JAK2, KIT, KRAS, MLL, NOTCHI, NPMI, NRAS), interrogation for sequence variants, and copy number variants or rearrangements, or
	isoform expression or mRNA expression levels, if performed; RNA analysis
81456	Targeted genomic sequence analysis panel, solid organ or hematolymphoid neoplasm or disorder, 51 or greater genes (eg, ALK, BRAF, CDKN2A,
	CEBPA, DNMT3A, EGFR, ERBB2, EZH2, FLT3, IDH1, IDH2, JAK2, KIT, KRAS, MET, MLL, NOTCH1, NPM1, NRAS, PDGFRA, PDGFRB, PGR,
	PIK3CA, PTEN, RET), interrogation for sequence variants and copy number variants or rearrangements, or isoform expression or mRNA
	expression levels, if performed; RNA analysis
90678	Respiratory syncytial virus vaccine, preF, subunit, bivalent, for intramuscular use
91321	Coronavirus vaccine 22
91322	Coronavirus vaccine 23
91323	Coronavirus vaccine 24
91324	Coronavirus vaccine 25
91325	Coronavirus vaccine 26
92066	Orthoptic training; under supervision of a physician or other qualified health care professional
95919	Quantitative pupillometry with physician or other qualified health care professional interpretation and report, unilateral or bilateral
98978	Remote therapeutic monitoring (eg, therapy adherence, therapy response); device(s) supply with scheduled (eg, daily) recording(s) and/or
	programmed alert(s) transmission to monitor cognitive behavioral therapy, each 30 days
0210A	Administration of coronavirus vaccine 22, reserved
0211A	Administration of coronavirus vaccine 22, reserved
0212A	Administration of coronavirus vaccine 22, reserved
0213A	Administration of coronavirus vaccine 22, reserved
0214A	Administration of coronavirus vaccine 22, reserved
0215A	Administration of coronavirus vaccine 22, reserved
0216A	Administration of coronavirus vaccine 22, reserved
0217A	Administration of coronavirus vaccine 22, reserved
0218A	Administration of coronavirus vaccine 22, reserved
0219A	Administration of coronavirus vaccine 22, reserved
0220A	Administration of coronavirus vaccine 23, reserved
0221A	Administration of coronavirus vaccine 23, reserved
0222A	Administration of coronavirus vaccine 23, reserved
0223A	Administration of coronavirus vaccine 23, reserved
0224A	Administration of coronavirus vaccine 23, reserved
0225A	Administration of coronavirus vaccine 23, reserved
0226A	Administration of coronavirus vaccine 23, reserved
0227A	Administration of coronavirus vaccine 23, reserved

0228A	Administration of coronavirus vaccine 23, reserved
0229A	Administration of coronavirus vaccine 23, reserved
0230A	Administration of coronavirus vaccine 24, reserved
0231A	Administration of coronavirus vaccine 24, reserved
0232A	Administration of coronavirus vaccine 24, reserved
0233A	Administration of coronavirus vaccine 24, reserved
0234A	Administration of coronavirus vaccine 24, reserved
0235A	Administration of coronavirus vaccine 24, reserved
0236A	Administration of coronavirus vaccine 24, reserved
0237A	Administration of coronavirus vaccine 24, reserved
0238A	Administration of coronavirus vaccine 24, reserved
0239A	Administration of coronavirus vaccine 24, reserved
0240A	Administration of coronavirus vaccine 24, reserved
0241A	Administration of coronavirus vaccine 25, reserved
0242A	Administration of coronavirus vaccine 25, reserved
0243A	Administration of coronavirus vaccine 25, reserved
0244A	Administration of coronavirus vaccine 25, reserved
0245A	Administration of coronavirus vaccine 25, reserved
0246A	Administration of coronavirus vaccine 25, reserved
0247A	Administration of coronavirus vaccine 25, reserved
0248A	Administration of coronavirus vaccine 25, reserved
0249A	Administration of coronavirus vaccine 25, reserved
0250A	Administration of coronavirus vaccine 26, reserved
0251A	Administration of coronavirus vaccine 26, reserved
0252A	Administration of coronavirus vaccine 26, reserved
0253A	Administration of coronavirus vaccine 26, reserved
0254A	Administration of coronavirus vaccine 26, reserved
0255A	Administration of coronavirus vaccine 26, reserved
0256A	Administration of coronavirus vaccine 26, reserved
0257A	Administration of coronavirus vaccine 26, reserved
0258A	Administration of coronavirus vaccine 26, reserved
0259A	Administration of coronavirus vaccine 26, reserved
0355U	APOLI (apolipoprotein LI) (eg, chronic kidney disease), risk variants (GI, G2)
0356U	Oncology (oropharyngeal), evaluation of 17 DNA biomarkers using droplet digital PCR (ddPCR), cell-free DNA, algorithm reported as a
	prognostic risk score for cancer recurrence

0357U	Oncology (melanoma), artificial intelligence (AI)-enabled quantitative mass spectrometry analysis of 142 unique pairs of glycopeptide and product
	fragments, plasma, prognostic, and predictive algorithm reported as likely, unlikely, or uncertain benefit from immunotherapy agents
0358U	Neurology (mild cognitive impairment), analysis of B-amyloid 1-42 and 1-40, chemiluminescence enzyme immunoassay, cerebral spinal fluid,
	reported as positive, likely positive, or negative
0359U	Oncology (prostate cancer), analysis of all prostate-specific antigen (PSA) structural isoforms by phase separation and immunoassay, plasma,
	algorithm reports risk of cancer
0360U	Oncology (lung), enzyme-linked immunosorbent assay (ELISA) of 7 autoantibodies (p53, NY-ESO-1, CAGE, GBU4-5, SOX2, MAGE A4, and
	HuD), plasma, algorithm reported as a categorical result for risk of malignancy
036IU	Neurofilament light chain, digital immunoassay, plasma, quantitative
0362U	Oncology (papillary thyroid cancer), gene-expression profiling via targeted hybrid capture–enrichment RNA sequencing of 82 content genes and 10 housekeeping genes, formalin-fixed paraffin embedded (FFPE) tissue, algorithm reported as one of three molecular subtypes
0363U	Oncology (urothelial), mRNA, gene-expression profiling by real-time quantitative PCR of 5 genes (MDK, HOXA13, CDC2 [CDK1], IGFBP5, and
03030	CXCR2), utilizing urine, algorithm incorporates age, sex, smoking history, and macrohematuria frequency, reported as a risk score for having
	urothelial carcinoma
0738T	Treatment planning for magnetic field induction ablation of malignant prostate tissue, using data from previously performed magnetic resonance
	imaging (MRI) examination
0739T	Ablation of malignant prostate tissue by magnetic field induction, including all intraprocedural, transperineal needle/catheter placement for
	nanoparticle installation and intraprocedural temperature monitoring, thermal dosimetry, bladder irrigation, and magnetic field nanoparticle
	activation
0740T	Remote autonomous algorithm-based recommendation system for insulin dose calculation and titration; initial set-up and patient education
074IT	Remote autonomous algorithm-based recommendation system for insulin dose calculation and titration; provision of software, data collection,
	transmission, and storage, each 30 days
0744T	Insertion of bioprosthetic valve, open, femoral vein, including duplex ultrasound imaging guidance, when performed, including autogenous or
	nonautogenous patch graft (eg, polyester, ePTFE, bovine pericardium), when performed
0745T	Cardiac focal ablation utilizing radiation therapy for arrhythmia; noninvasive arrhythmia localization and mapping of arrhythmia site (nidus),
	derived from anatomical image data (eg, CT, MRI, or myocardial perfusion scan) and electrical data (eg, 12-lead ECG data), and identification of
	areas of avoidance
0746T	Cardiac focal ablation utilizing radiation therapy for arrhythmia; conversion of arrhythmia localization and mapping of arrhythmia site (nidus) into
	a multidimensional radiation treatment plan
0747T	Cardiac focal ablation utilizing radiation therapy for arrhythmia; delivery of radiation therapy, arrhythmia
0748T	Injections of stem cell product into perianal perifistular soft tissue, including fistula preparation (eg, removal of setons, fistula curettage, closure of
A7//T	internal openings)
0766T	Transcutaneous magnetic stimulation by focused low-frequency electromagnetic pulse, peripheral nerve, initial treatment, with identification and
	marking of the treatment location, including noninvasive electroneurographic localization (nerve conduction localization), when performed; first
	nerve

0767T	Transcutaneous magnetic stimulation by focused low-frequency electromagnetic pulse, peripheral nerve, initial treatment, with identification and marking of the treatment location, including noninvasive electroneurographic localization (nerve conduction localization), when performed; each additional nerve (List separately in addition to code for primary procedure)
0768T	Transcutaneous magnetic stimulation by focused low-frequency electromagnetic pulse, peripheral nerve, subsequent treatment, including noninvasive electroneurographic localization (nerve conduction localization), when performed; first nerve
0769T	Transcutaneous magnetic stimulation by focused low-frequency electromagnetic pulse, peripheral nerve, subsequent treatment, including noninvasive electroneurographic localization (nerve conduction localization), when performed; each additional nerve (List separately in addition to code for primary procedure)
0770T	Virtual reality technology to assist therapy (List separately in addition to code for primary procedure)
077IT	Virtual reality (VR) procedural dissociation services provided by the same physician or other qualified health care professional performing the diagnostic or therapeutic service that the VR procedural dissociation supports, requiring the presence of an independent, trained observer to assist in the monitoring of the patient's level of dissociation or consciousness and physiological status; initial 15 minutes of intraservice time, patient aged 5 years or older
0772T	Virtual reality (VR) procedural dissociation services provided by the same physician or other qualified health care professional performing the diagnostic or therapeutic service that the VR procedural dissociation supports, requiring the presence of an independent, trained observer to assist in the monitoring of the patient's level of dissociation or consciousness and physiological status; each additional 15 minutes intraservice time (List separately in addition to code for primary service)
0773T	Virtual reality (VR) procedural dissociation services provided by a physician or other qualified health care professional other than the physician or other qualified health care professional performing the diagnostic or therapeutic service that the VR procedural dissociation supports; initial 15 minutes of intraservice time, patient aged 5 years or older
0774T	Virtual reality (VR) procedural dissociation services provided by a physician or other qualified health care professional other than the physician or other qualified health care professional performing the diagnostic or therapeutic service that the VR procedural dissociation supports; each additional 15 minutes intraservice time (List separately in addition to code for primary service)
0775T	Arthrodesis, sacroiliac joint, percutaneous, with image guidance, includes placement of intra-articular implant(s) (eg, bone allograft[s], synthetic device[s])
0776T	Therapeutic induction of intra-brain hypothermia, including placement of a mechanical temperature-controlled cooling device to the neck over carotids and head, including monitoring (eg, vital signs and sport concussion assessment tool 5 [SCAT5]), 30 minutes of treatment
0777T	Real-time pressure-sensing epidural guidance system (List separately in addition to code for primary procedure)
0778T	Surface mechanomyography (sMMG) with concurrent application of inertial measurement unit (IMU) sensors for measurement of multi-joint range of motion, posture, gait, and muscle function
0779T	Gastrointestinal myoelectrical activity study, stomach through colon, with interpretation and report
0780T	Instillation of fecal microbiota suspension via rectal enema into lower gastrointestinal tract
078IT	Bronchoscopy, rigid or flexible, with insertion of esophageal protection device and circumferential radiofrequency destruction of the pulmonary nerves, including fluoroscopic guidance when performed; bilateral mainstem bronchi
0782T	Bronchoscopy, rigid or flexible, with insertion of esophageal protection device and circumferential radiofrequency destruction of the pulmonary nerves, including fluoroscopic guidance when performed; unilateral mainstem bronchus

0783T	Transcutaneous auricular neurostimulation, set-up, calibration, and patient education on use of equipment
C1747	Endoscope, single-use (i.e. disposable), urinary tract, imaging/illumination device (insertable)
C7500	Debridement, bone including epidermis, dermis, subcutaneous tissue, muscle and/or fascia, if performed, first 20 sq cm or less with manual preparation and insertion of deep (eg, subfacial) drug-delivery device(s)
C7509	Bronchoscopy, rigid or flexible, diagnostic with cell washing(s) when performed, with computer-assisted image-guided navigation, including fluoroscopic guidance when performed
C7510	Bronchoscopy, rigid or flexible, with bronchial alveolar lavage(s), with computer-assisted image-guided navigation, including fluoroscopic guidance when performed
C7511	Bronchoscopy, rigid or flexible, with single or multiple bronchial or endobronchial biopsy(ies), single or multiple sites, with computer-assisted image-guided navigation, including fluoroscopic guidance when performed
C7512	Bronchoscopy, rigid or flexible, with single or multiple bronchial or endobronchial biopsy(ies), single or multiple sites, with transendoscopic endobronchial ultrasound (ebus) during bronchoscopic diagnostic or therapeutic intervention(s) for peripheral lesion(s), including fluoroscopic guidance when performed
C7513	Dialysis circuit, introduction of needle(s) and/or catheter(s), with diagnostic angiography of the dialysis circuit, including all direct puncture(s) and catheter placement(s), injection(s) of contrast, all necessary imaging from the arterial anastomosis and adjacent artery through entire venous outflow including the inferior or superior vena cava, fluoroscopic guidance, with transluminal balloon angioplasty of central dialysis segment, performed through dialysis circuit, including all required imaging, radiological supervision and interpretation, image documentation and report
C7514	Dialysis circuit, introduction of needle(s) and/or catheter(s), with diagnostic angiography of the dialysis circuit, including all direct puncture(s) and catheter placement(s), injection(s) of contrast, all necessary imaging from the arterial anastomosis and adjacent artery through entire venous outflow including the inferior or superior vena cava, fluoroscopic guidance, with all angioplasty in the central dialysis segment, and transcatheter placement of intravascular stent(s), central dialysis segment, performed through dialysis circuit, including all required imaging, radiological supervision and interpretation, image documentation and report
C7515	Dialysis circuit, introduction of needle(s) and/or catheter(s), with diagnostic angiography of the dialysis circuit, including all direct puncture(s) and catheter placement(s), injection(s) of contrast, all necessary imaging from the arterial anastomosis and adjacent artery through entire venous outflow including the inferior or superior vena cava, fluoroscopic guidance, with dialysis circuit permanent endovascular embolization or occlusion of main circuit or any accessory veins, including all required imaging, radiological supervision and interpretation, image documentation and report
C7516	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, with endoluminal imaging of initial coronary vessel or graft using intravascular ultrasound (ivus) or optical coherence tomography (oct) during diagnostic evaluation and/or therapeutic intervention including imaging supervision, interpretation and report
C7517	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, with iliac and/or femoral artery angiography, non-selective, bilateral or ipsilateral to catheter insertion, performed at the same time as cardiac catheterization and/or coronary angiography, includes positioning or placement of the catheter in the distal aorta or ipsilateral femoral or iliac artery, injection of dye, production of permanent images, and radiologic supervision and interpretation

C7518	Catheter placement in coronary artery(ies) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation, with catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) including intraprocedural injection(s) for bypass graft angiography with endoluminal imaging of initial coronary vessel or graft using intravascular ultrasound (ivus) or optical coherence tomography (oct) during diagnostic evaluation and/or therapeutic intervention including imaging, supervision, interpretation and report
C7519	Catheter placement in coronary artery(ies) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation, with catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) including intraprocedural injection(s) for bypass graft angiography with intravascular doppler velocity and/or pressure derived coronary flow reserve measurement (initial coronary vessel or graft) during coronary angiography including pharmacologically induced stress
C7520	Catheter placement in coronary artery(ies) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation, with catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) includes intraprocedural injection(s) for bypass graft angiography with iliac and/or femoral artery angiography, non-selective, bilateral or ipsilateral to catheter insertion, performed at the same time as cardiac catheterization and/or coronary angiography, includes positioning or placement of the catheter in the distal aorta or ipsilateral femoral or iliac artery, injection of dye, production of permanent images, and radiologic supervision and interpretation
C7521	Catheter placement in coronary artery(ies) for coronary angiography, including intraprocedural injection(s) for coronary angiography with right heart catheterization with endoluminal imaging of initial coronary vessel or graft using intravascular ultrasound (ivus) or optical coherence tomography (oct) during diagnostic evaluation and/or therapeutic intervention including imaging supervision, interpretation and report
C7522	Catheter placement in coronary artery(ies) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation with right heart catheterization, with intravascular doppler velocity and/or pressure derived coronary flow reserve measurement (initial coronary vessel or graft) during coronary angiography including pharmacologically induced stress
C7523	Catheter placement in coronary artery(ies) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation, with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, with endoluminal imaging of initial coronary vessel or graft using intravascular ultrasound (ivus) or optical coherence tomography (oct) during diagnostic evaluation and/or therapeutic intervention including imaging supervision, interpretation and report
C7524	Catheter placement in coronary artery(ies) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation, with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, with intravascular doppler velocity and/or pressure derived coronary flow reserve measurement (initial coronary vessel or graft) during coronary angiography including pharmacologically induced stress
C7525	Catheter placement in coronary artery(ies) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation, with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography with endoluminal imaging of initial coronary vessel or graft using intravascular ultrasound (ivus) or optical coherence tomography (oct) during diagnostic evaluation and/or therapeutic intervention including imaging supervision, interpretation and report

C7526	Catheter placement in coronary artery(ies) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation, with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography with intravascular doppler velocity and/or pressure derived coronary flow reserve measurement (initial coronary vessel or graft) during coronary angiography including
	pharmacologically induced stress
C7527	Catheter placement in coronary artery(ies) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation, with right and left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, with endoluminal imaging of initial coronary vessel or graft using intravascular ultrasound (ivus) or optical coherence tomography (oct) during diagnostic evaluation and/or therapeutic intervention including imaging supervision, interpretation and report
C7528	Catheter placement in coronary artery(ies) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation, with right and left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, with intravascular doppler velocity and/or pressure derived coronary flow reserve measurement (initial coronary vessel or graft) during coronary angiography including pharmacologically induced stress
C7529	Catheter placement in coronary artery(ies) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation, with right and left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography with intravascular doppler velocity and/or pressure derived coronary flow reserve measurement (initial coronary vessel or graft) during coronary angiography including pharmacologically induced stress
C7530	Dialysis circuit, introduction of needle(s) and/or catheter(s), with diagnostic angiography of the dialysis circuit, including all direct puncture(s) and catheter placement(s), injection(s) of contrast, all necessary imaging from the arterial anastomosis and adjacent artery through entire venous outflow including the inferior or superior vena cava, fluoroscopic guidance, with transluminal balloon angioplasty, peripheral dialysis segment, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty and all angioplasty in the central dialysis segment, with transcatheter placement of intravascular stent(s), central dialysis segment, performed through dialysis circuit, including all imaging, radiological supervision and interpretation and report
C7531	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(ies), unilateral, with transluminal angioplasty with intravascular ultrasound (initial noncoronary vessel) during diagnostic evaluation and/or therapeutic intervention, including radiological supervision and interpretation
C7532	Transluminal balloon angioplasty (except lower extremity artery(ies) for occlusive disease, intracranial, coronary, pulmonary, or dialysis circuit), initial artery, open or percutaneous, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, with intravascular ultrasound (initial noncoronary vessel) during diagnostic evaluation and/or therapeutic intervention, including radiological supervision and interpretation
C7533	Percutaneous transluminal coronary angioplasty, single major coronary artery or branch with transcatheter placement of radiation delivery device for subsequent coronary intravascular brachytherapy

C7545	Percutaneous exchange of biliary drainage catheter (eg, external, internal-external, or conversion of internal-external to external only), with removal of calculi/debris from biliary duct(s) and/or gallbladder, including destruction of calculi by any method (eg, mechanical, electrohydraulic,
	lithotripsy) when performed, including diagnostic cholangiography(ies) when performed, imaging guidance (eg, fluoroscopy), and all associated
	radiological supervision and interpretation
C7546	Removal and replacement of externally accessible nephroureteral catheter (eg, external/internal stent) requiring fluoroscopic guidance, with ureteral stricture balloon dilation, including imaging guidance and all associated radiological supervision and interpretation
C7547	Convert nephrostomy catheter to nephroureteral catheter, percutaneous via pre-existing nephrostomy tract, with ureteral stricture balloon
	dialation, including diagnostic nephrostogram and/or ureterogram when performed, imaging guidance (eg, ultrasound and/or fluoroscopy) and all
	associated radiological supervision and interpretation
C7548	Exchange nephrostomy catheter, percutaneous, with ureteral stricture balloon dilation, including diagnostic nephrostogram and/or ureterogram
07140	when performed, imaging guidance (eg, ultrasound and/or fluoroscopy) and all associated radiological supervision and interpretation
C7549	Change of ureterostomy tube or externally accessible ureteral stent via ileal conduit with ureteral stricture balloon dilation, including imaging
07550	guidance (eg, ultrasound and/or fluoroscopy) and all associated radiological supervision and interpretation
C7550	Cystourethroscopy, with biopsy(ies) with adjuctive blue light cystoscopy with fluorescent imaging agent
C7551	Excision of major peripheral nerve neuroma, except sciatic, with implantation of nerve end into bone or muscle
C7552	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging
	supervision and interpretation; with catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) including
	intraprocedural injection(s) for bypass graft angiography and right heart catheterization with intravascular doppler velocity and/or pressure derived coronary flow reserve measurement (coronary vessel or graft) during coronary angiography including pharmacologically induced stress,
	initial vessel
C7553	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging
0/555	supervision and interpretation; with right and left heart catheterization including intraprocedural injection(s) for left ventriculography, inlaging
	performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography with
	pharmacologic agent administration (eg, inhaled nitric oxide, intravenous infusion of nitroprusside, dobutamine, milrinone, or other agent)
	including assessing hemodynamic measurements before, during, after and repeat pharmacologic agent administration, when performed
C7554	Cystourethroscopy with adjunctive blue light cystoscopy with fluorescent imaging agent
C9144	Injection, bupivacaine (posimir), 1 mg
G0322	The collection of physiologic data digitally stored and/or transmitted by the patient to the home health agency (i.e., remote patient monitoring)
J0173	Injection, epinephrine (belcher) not therapeutically equivalent to j0171, 0.1 mg
M0001	Advancing cancer care mips value pathways
M0002	Optimal care for kidney health mips value pathways
M0003	Optimal care for patients with episodic neurological conditions mips value pathways
M0004	Supportive care for neurodegenerative conditions mips value pathways
M0005	Promoting wellness mips value pathways

M1150	Left ventricular ejection fraction (lvef) less than or equal to 40% or documentation of moderately or severely depressed left ventricular systolic
	function
M1151	Patients with a history of heart transplant or with a left ventricular assist device (lvad)
M1152	Patients with a history of heart transplant or with a left ventricular assist device (lvad)
M1153	Patient with diagnosis of osteoporosis on date of encounter
M1154	Hospice services provided to patient any time during the measurement period
M1155	Patient had anaphylaxis due to the pneumococcal vaccine any time during or before the measurement period
M1156	Patient received active chemotherapy any time during the measurement period
MI157	Patient received bone marrow transplant any time during the measurement period
M1158	Patient had history of immunocompromising conditions prior to or during the measurement period
M1159	Hospice services provided to patient any time during the measurement period
M1160	Patient had anaphylaxis due to the meningococcal vaccine any time on or before the patient's 13th birthday
M1161	Patient had anaphylaxis due to the tetanus, diphtheria or pertussis vaccine any time on or before the patient's 13th birthday
M1162	Patient had encephalitis due to the tetanus, diphtheria or pertussis vaccine any time on or before the patient's 13th birthday
M1163	Patient had anaphylaxis due to the hpv vaccine any time on or before the patient's 13th birthday
M1164	Patients with dementia any time during the patient's history through the end of the measurement period
M1165	Patients who use hospice services any time during the measurement period
M1166	Pathology report for tissue specimens produced from wide local excisions or re-excisions
M1167	In hospice or using hospice services during the measurement period
M1168	Patient received an influenza vaccine on or between july I of the year prior to the measurement period and june 30 of the measurement period
M1169	Documentation of medical reason(s) for not administering influenza vaccine (e.g., prior anaphylaxis due to the influenza vaccine)
M1170	Patient did not receive an influenza vaccine on or between july I of the year prior to the measurement period and june 30 of the measurement
	period
MI 171	Patient received at least one td vaccine or one tdap vaccine between nine years prior to the encounter and the end of the measurement period
MI172	Documentation of medical reason(s) for not administering td or tdap vaccine (e.g., prior anaphylaxis due to the td or tdap vaccine or history of
	encephalopathy within seven days after a previous dose of a td-containing vaccine)
M1173	Patient did not receive at least one td vaccine or one tdap vaccine between nine years prior to the encounter and the end of the measurement
	period
M1174	Patient received at least one dose of the herpes zoster live vaccine or two doses of the herpes zoster recombinant vaccine (at least 28 days
	apart) anytime on or after the patient's 50th birthday before or during the measurement period
MI175	Documentation of medical reason(s) for not administering zoster vaccine (e.g., prior anaphylaxis due to the zoster vaccine)
MI176	Patient did not receive at least one dose of the herpes zoster live vaccine or two doses of the herpes zoster recombinant vaccine (at least 28
	days apart) anytime on or after the patient's 50th birthday before or during the measurement period
MI 177	Patient received any pneumococcal conjugate or polysaccharide vaccine on or after their 60th birthday and before the end of the measurement
	period

M1178	Documentation of medical reason(s) for not administering pneumococcal vaccine (e.g., prior anaphylaxis due to the pneumococcal vaccine)
M1179	Patient did not receive any pneumococcal conjugate or polysaccharide vaccine, on or after their 60th birthday and before or during measurement
	period
M1180	Patients on immune checkpoint inhibitor therapy
M1181	Grade 2 or above diarrhea and/or grade 2 or above colitis
M1182	Patients not eligible due to pre-existing inflammatory bowel disease (ibd) (e.g., ulcerative colitis, crohn's disease)
M1183	Documentation of immune checkpoint inhibitor therapy held and corticosteroids or immunosuppressants prescribed or administered
M1184	Documentation of medical reason(s) for not prescribing or administering corticosteroid or immunosuppressant treatment (e.g., allergy,
	intolerance, infectious etiology, pancreatic insufficiency, hyperthyroidism, prior bowel surgical interventions, celiac disease, receiving other
	medication, awaiting diagnostic workup results for alternative etiologies, other medical reasons/contraindication)
M1185	Documentation of immune checkpoint inhibitor therapy not held and/or corticosteroids or immunosuppressants prescribed or administered was
	not performed, reason not given
M1186	Patients who have an order for or are receiving hospice or palliative care
MI 187	Patients with a diagnosis of end stage renal disease (esrd)
M1188	Patients with a diagnosis of chronic kidney disease (ckd) stage 5
M1189	Documentation of a kidney health evaluation defined by an estimated glomerular filtration rate (egfr) and urine albumin-creatinine ratio (uacr)
	performed
M1190	Documentation of a kidney health evaluation was not performed or defined by an estimated glomerular filtration rate (egfr) and urine albumin-
	creatinine ratio (uacr)
M1191	Hospice services provided to patient any time during the measurement period
M1192	Patients with an existing diagnosis of squamous cell carcinoma of the esophagus
M1193	Surgical pathology reports that contain impression or conclusion of or recommendation for testing of mmr by immunohistochemistry, msi by dna-
	based testing status, or both
M1194	Documentation of medical reason(s) surgical pathology reports did not contain impression or conclusion of or recommendation for testing of
	mmr by immunohistochemistry, msi by dna-based testing status, or both tests were not included (e.g., patient will not be treated with checkpoint
	inhibitor therapy, no residual carcinoma is present in the sample [tissue exhausted or status post neoadjuvant treatment], insufficient tumor for
	testing)
M1195	Surgical pathology reports that do not contain impression or conclusion of or recommendation for testing of mmr by immunohistochemistry, msi
	by dna-based testing status, or both, reason not given
M1196	Initial (index visit) numeric rating scale (nrs), visual rating scale (vrs), or itchyquant assessment score of greater than or equal to 4
MI197	Itch severity assessment score is reduced by 2 or more points from the initial (index) assessment score to the follow-up visit score
M1198	Itch severity assessment score was not reduced by at least 2 points from initial (index) score to the follow-up visit score or assessment was not
	completed during the follow-up encounter
M1199	Patients receiving rrt
M1200	Ace inhibitor (ace-i) or arb therapy prescribed during the measurement period

MI201	Documentation of medical reason(s) for not prescribing ace inhibitor (ace-i) or arb therapy during the measurement period (e.g., pregnancy,
	history of angioedema to ace-i, other allergy to ace-i and arb, hyperkalemia or history of hyperkalemia while on ace-i or arb therapy, acute kidney
	injury due to ace-i or arb therapy), other medical reasons)
M1202	Documentation of patient reason(s) for not prescribing ace inhibitor or arb therapy during the measurement period, (e.g., patient declined, other
	patient reasons)
M1203	Ace inhibitor or arb therapy not prescribed during the measurement period; reason not given
M1204	Initial (index visit) numeric rating scale (nrs), visual rating scale (vrs), or itchyquant assessment score of greater than or equal to 4
M1205	Itch severity assessment score is reduced by 2 or more points from the initial (index) assessment score to the follow-up visit score
M1206	Itch severity assessment score was not reduced by at least 2 points from initial (index) score to the follow-up visit score or assessment was not
	completed during the follow-up encounter
M1207	Number of patients screened for food insecurity, housing instability, transportation needs, utility difficulties, and interpersonal safety
M1208	Number of patients not screened for food insecurity, housing instability, transportation needs, utility difficulties, and interpersonal safety
M1209	At least two orders for high-risk medications from the same drug class, (table 4), not ordered
M1210	At least two orders for high-risk medications from the same drug class, (table 4), not ordered
Q4262	Dual layer impax membrane, per square centimeter
Q4263	Surgraft tl, per square centimeter
Q4264	Cocoon membrane, per square centimeter
Z55.6	Problems related to health literacy
Z59.10	Inadequate housing, unspecified
Z59.11	Inadequate housing environmental temperature
Z59.12	Inadequate housing utilities
Z59.19	Other inadequate housing
Z91.141	Patient's other noncompliance with medication regimen due to financial hardship
Z91.148	Patient's other noncompliance with medication regimen for other reason
Z91.151	Patient's noncompliance with renal dialysis due to financial hardship
Z91.158	Patient's noncompliance with renal dialysis for other reason

 Table 8 – Deleted Codes

Code	Desc	Effective Date	Replacement Code (if applicable)
15850	Removal of sutures under anesthesia by same surgeon	12/31/2022	15851
49560	Repair of incisional or abdominal hernia	12/31/2022	49591-49596
49561	Repair of trapped incisional or abdominal hernia	12/31/2022	49591-49596
49565	Repair of recurrent incisional or abdominal hernia	12/31/2022	49613, 49614, 49615, 49616, 49617, 49618
49566	Repair of trapped recurrent incisional or abdominal hernia	12/31/2022	49613, 49614, 49615, 49616, 49617, 49618
49568	Placement of mesh to repair incisional or abdominal hernia	12/31/2022	49591-49596, 49600, 49605, 49606, 49610-49611, 49613, 49614, 49615, 49616, 49617, 49618
49570	Repair of incisional or abdominal hernia in upper stomach area	12/31/2022	49591-49596, 49600, 49605, 49606, 49610-49611, 49613, 49614, 49615, 49616, 49617, 49618
49572	Repair of trapped incisional or abdominal hernia in upper stomach area	12/31/2022	49591-49596, 49600, 49605, 49606, 49610-49611, 49613, 49614, 49615, 49616, 49617, 49618
49580	Repair of hernia at navel (younger than 5 years)	12/31/2022	49591-49596, 49600, 49605, 49606, 49610-49611, 49613, 49614, 49615, 49616, 49617, 49618
49582	Repair of trapped hernia at navel (younger than 5 years)	12/31/2022	49591-49596, 49600, 49605, 49606, 49610-49611, 49613, 49614, 49615, 49616, 49617, 49618
49585	Repair of hernia at navel (5 years or older)	12/31/2022	49591-49596, 49600, 49605, 49606, 49610-49611, 49613, 49614, 49615, 49616, 49617, 49618
49587	Repair of trapped hernia at navel (5 years or older)	12/31/2022	49591-49596, 49600, 49605, 49606, 49610-49611, 49613, 49614, 49615, 49616, 49617, 49618
49590	Repair of hernia between abdominal muscles	12/31/2022	49591-49596, 49600, 49605, 49606, 49610-49611, 49613, 49614, 49615, 49616, 49617, 49618

49652	Repair of hernia using an endoscope	12/31/2022	49591-49596, 49600, 49605, 49606, 49610-49611, 49613, 49614, 49615, 49616, 49617, 49618
49653	Repair of trapped hernia using an endoscope	12/31/2022	49591-49596, 49600, 49605, 49606, 49610-49611, 49613, 49614, 49615, 49616, 49617, 49618
49654	Repair of incisional hernia using an endoscope	12/31/2022	49591-49596, 49600, 49605, 49606, 49610-49611, 49613, 49614, 49615, 49616, 49617, 49618
49655	Repair of trapped incisional hernia using an endoscope	12/31/2022	49591-49596, 49600, 49605, 49606, 49610-49611, 49613, 49614, 49615, 49616, 49617, 49618
49656	Repair of recurrent incisional hernia using an endoscope	12/31/2022	49613, 49614, 49615, 49616, 49617, 49618
49657	Repair of recurrent trapped incisional hernia using an endoscope	12/31/2022	49613, 49614, 49615, 49616, 49617, 49618
99217	Hospital observation care on day of discharge	12/31/2022	99238-99239
99218	Initial hospital observation care per day, typically 30 minutes	12/31/2022	99221-99223
99219	Initial hospital observation care per day, typically 50 minutes	12/31/2022	99221-99223
99220	Initial hospital observation care per day, typically 70 minutes	12/31/2022	99221-99223
99224	Follow-up observation care per day, typically 15 minutes	12/31/2022	99231-99233
99225	Follow-up observation care per day, typically 25 minutes	12/31/2022	99231-99233
99226	Follow-up observation care per day, typically 35 minutes	12/31/2022	99231-99233
99241	Office consultation, typically 15 minutes	12/31/2022	99242
9925 I	Inpatient hospital consultation, typically 20 minutes	12/31/2022	99252
99318	Nursing facility annual assessment, typically 30 minutes	12/31/2022	99307-99310
99324	New patient custodial care facility, group care, or assisted living visit, typically 20 minutes	12/31/2022	99341-99345
99325	New patient custodial care facility, group care, or assisted living visit, typically 30 minutes	12/31/2022	99341-99345
99326	New patient custodial care facility, group care, or assisted living visit, typically 45 minutes	12/31/2022	99341-99345
99327	New patient custodial care facility, group care, or assisted living visit, typically I hour	12/31/2022	99341-99345
99328	New patient custodial care facility, group care, or assisted living visit, typically 75 minutes	12/31/2022	99341-99345

99334	Established patient custodial care facility, group care, or assisted living visit, typically 15 minutes	12/31/2022	99347-99350
99335	Established patient custodial care facility, group care, or assisted living visit, typically 25 minutes	12/31/2022	99347-99350
99336	Established patient custodial care facility, group care, or assisted living visit, typically 40 minutes	12/31/2022	99347-99350
99337	Established patient custodial care facility, group care, or assisted living visit, typically I hour	12/31/2022	99347-99350
99339	Home or assisted living facility physician supervision of care per month, 15-29 minutes	12/31/2022	99437, 99491, 99424, 99425
99340	Home or assisted living facility physician supervision of care per month, 30 minutes or more	12/31/2022	99437, 99491, 99424, 99425
99343	New patient home visit, typically 45 minutes	12/31/2022	99341-99345
99354	Extended office or other outpatient service, first hour	12/31/2022	99417
99355	Extended office or other outpatient service, each additional 30 minutes	12/31/2022	99417
99356	Extended inpatient or observation hospital service, first hour	12/31/2022	99418
99357	Extended inpatient or observation hospital service, each additional 30 minutes	12/31/2022	99418
0163T	Insertion of lower spine artificial disc, anterior approach	12/31/2022	22857-22860
0312T	Implantation of neurostimulator electrodes and pulse generator for vagus nerve blocking therapy for obesity using an endoscope	12/31/2022	64999
0313T	Revision or replacement of neurostimulator electrodes for vagus nerve blocking therapy for obesity using an endoscope	12/31/2022	64999
0314T	Removal of neurostimulator electrodes and pulse generator for vagus nerve blocking therapy for obesity using an endoscope	12/31/2022	64999
0315T	Removal of pulse generator for vagus nerve blocking therapy for treatment of obesity	12/31/2022	64999
0316T	Replacement of pulse generator for vagus nerve blocking therapy for treatment of obesity	12/31/2022	64999
0317T	Pulse generator analysis of a vagus nerve blocking therapy system for treatment of obesity	12/31/2022	64999
0470T	OCT scan of skin lesion with interpretation and report, first lesion	12/31/2022	96999
047IT	OCT scan of skin lesion with interpretation and report, each additional lesion	12/31/2022	96999
0475T	Recording of fetal magnetic heart signal with technical analysis and interpretation of report	12/31/2022	93799
0476T	Recording of fetal magnetic heart signal with electronic signal transfer of data and storage	12/31/2022	93799

0477T	Recording of fetal magnetic heart signal with signal extraction, technical analysis, and result	12/31/2022	93799
0478T	Recording of fetal magnetic heart signal with review and interpretation of report	12/31/2022	93799
0487T	Biomechanical mapping accessed through the vagina	12/31/2022	58999
049IT	Laser treatment of open wound, first 20 sq cm or less	12/31/2022	17999
0492T	Laser treatment of open wound, each additional 20 sq cm	12/31/2022	17999
0493T	Contact near-infrared spectroscopy of wound of leg	12/31/2022	93998
0497T	Connection of external patient-activated EKG event recorder	12/31/2022	93799
0498T	Review and interpretation of external patient-activated EKG event recordings	12/31/2022	93799
0499T	Examination of bladder and urethra with mechanical dilation and drug delivery for	12/31/2022	
	narrowing of urethra using an endoscope		
0514T	Visual axis identification using patient fixation during operation	12/31/2022	
0702T	Supply and technical support for remote therapeutic monitoring of standardized	12/31/2022	98978
	online digital cognitive behavioral therapy program, per 30 days		
0703T	Management services for remote therapeutic monitoring of standardized online digital	12/31/2022	98978
	cognitive behavioral therapy program, per 30 days		
C1849	Skin substitute, synthetic, resorbable, per square centimeter	12/31/2022	
C9142	Injection, bevacizumab-maly, biosimilar, (alymsys), 10 mg	12/31/2022	Q5126
G0028	Documentation of medical reason(s) for not screening for tobacco use (e.g., limited	12/31/2022	
	life expectancy, other medical reason)		
G0308	Creation of subcutaneous pocket with insertion of 180 day implantable interstitial	12/31/2022	
	glucose sensor, including system activation and patient training		
G0309	Removal of implantable interstitial glucose sensor with creation of subcutaneous	12/31/2022	
	pocket at different anatomic site and insertion of new 180 day implantable sensor,		
	including system activation		
G2095	Documentation of system reason(s) for not prescribing ace inhibitor or arb or arni	12/31/2022	
	therapy (e.g., other system reasons)		
G2170	Percutaneous arteriovenous fistula creation (avf), direct, any site, by tissue	12/31/2022	36836
	approximation using thermal resistance energy, and secondary procedures to redirect		
	blood flow (e.g., transluminal balloon angioplasty, coil embolization) when performed,		
	and includes all imaging and radiologic guidance, supervision and interpretation, when		
	performed		

G2171	Percutaneous arteriovenous fistula creation (avf), direct, any site, using magnetic-	12/31/2022	36837
	guided arterial and venous catheters and radiofrequency energy, including flow-		
	directing procedures (e.g., vascular coil embolization with radiologic supervision and		
	interpretation, wen performed) and fistulogram(s), angiography, enography, and/or		
	ultrasound, with radiologic supervision and interpretation, when performed		
G2198	Documentation of medical reason(s) for not screening for unhealthy alcohol use using	12/31/2022	
	a systematic screening method (e.g., limited life expectancy, other medical reasons)		
G2201	Documentation of medical reason(s) for not providing brief counseling (e.g., limited	12/31/2022	
	life expectancy, other medical reasons)		
G2203	Documentation of medical reason(s) for not providing brief counseling if identified as	12/31/2022	
	an unhealthy alcohol user (e.g., limited life expectancy, other medical reasons)		
G9196	Documentation of medical reason(s) for not ordering a first or second generation	12/31/2022	
	cephalosporin for antimicrobial prophylaxis (e.g., patients enrolled in clinical trials,		
	patients with documented infection prior to surgical procedure of interest, patients		
	who were receiving antibiotics more than 24 hours prior to surgery [except colon		
	surgery patients taking oral prophylactic antibiotics], patients who were receiving		
	antibiotics within 24 hours prior to arrival [except colon surgery patients taking oral		
	prophylactic antibiotics], other medical reason(s))		
G9197	Documentation of order for first or second generation cephalosporin for	12/31/2022	
	antimicrobial prophylaxis		
G9198	Order for first or second generation cephalosporin for antimicrobial prophylaxis was	12/31/2022	
	not documented, reason not given		
G9250	Documentation of patient pain brought to a comfortable level within 48 hours from	12/31/2022	
	initial assessment		
G9251	Documentation of patient with pain not brought to a comfortable level within 48	12/31/2022	
	hours from initial assessment		
G9359	Documentation of negative or managed positive to screen with further evidence that	12/31/2022	
6 00/0	tb is not active prior to treatment with a biologic immune response modifier	10/01/0000	
G9360	No documentation of negative or managed positive tb screen	12/31/2022	
G9506	Biologic immune response modifier prescribed	12/31/2022	
G9618	Documentation of screening for uterine malignancy or those that had an ultrasound	12/31/2022	
	and/or endometrial sampling of any kind		
G9620	Patient not screened for uterine malignancy, or those that have not had an ultrasound	12/31/2022	
	and/or endometrial sampling of any kind, reason not given		
G9623	Documentation of medical reason(s) for not screening for unhealthy alcohol use (e.g.,	12/31/2022	
	limited life expectancy, other medical reasons)		

G9631	Patient sustained ureter injury at the time of surgery or discovered subsequently up to 30 days post-surgery	12/31/2022	
G9632	Documented medical reasons for not reporting ureter injury (e.g., gynecologic or other pelvic malignancy documented, concurrent surgery involving bladder pathology, injury that occurs during a urinary incontinence procedure, patient death from non- medical causes not related to surgery, patient died during procedure without evidence of ureter injury)	12/31/2022	
G9633	Patient did not sustain ureter injury at the time of surgery nor discovered subsequently up to 30 days post-surgery	12/31/2022	
G9718	Hospice services for patient provided any time during the measurement period	12/31/2022	
G9774	Patients who have had a hysterectomy	12/31/2022	
G9778	Patients who have a diagnosis of pregnancy at any time during the measurement period	12/31/2022	
G9808	Any patients who had no asthma controller medications dispensed during the measurement year	12/31/2022	
G9809	Patients who use hospice services any time during the measurement period	12/31/2022	
G9810	Patient achieved a pdc of at least 75% for their asthma controller medication	12/31/2022	
G9811	Patient did not achieve a pdc of at least 75% for their asthma controller medication	12/31/2022	
G9904	Documentation of medical reason(s) for not screening for tobacco use (e.g., limited life expectancy, other medical reason)	12/31/2022	
G9907	Documentation of medical reason(s) for not providing tobacco cessation intervention on the date of the encounter or within the previous 12 months (e.g., limited life expectancy, other medical reason)	12/31/2022	
G9909	Documentation of medical reason(s) for not providing tobacco cessation intervention on the date of the encounter or within the previous 12 months if identified as a tobacco user (e.g., limited life expectancy, other medical reason)	12/31/2022	
G9932	Documentation of patient reason(s) for not having records of negative or managed positive tb screen (e.g., patient does not return for mantoux (ppd) skin test evaluation)	12/31/2022	
G9942	Patient had any additional spine procedures performed on the same date as the lumbar discectomy/laminectomy	12/31/2022	
G9948	Patient had any additional spine procedures performed on the same date as the lumbar discectomy/laminectomy	12/31/2022	
G9989	Documentation of medical reason(s) for not administering pneumococcal vaccine (e.g., adverse reaction to vaccine)	12/31/2022	

J2400	Injection, chloroprocaine hydrochloride, per 30 ml	12/31/2022	J2401, J2402
J9044	Injection, bortezomib, not otherwise specified, 0.1 mg	12/31/2022	J9041, J9046, J9048, J9049
K0553	Supply allowance for therapeutic continuous glucose monitor (cgm), includes all supplies and accessories, I month supply = I unit of service	12/31/2022	
K0554	Receiver (monitor), dedicated, for use with therapeutic glucose continuous monitor system	12/31/2022	
MI017	Patient admitted to palliative care services	12/31/2022	
M1071	Patient had any additional spine procedures performed on the same date as the lumbar discectomy/laminotomy	12/31/2022	