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Coverage & Billing Information for the 2024 Q1 Quarterly Code Update

BACKGROUND

Iowa Medicaid has reviewed the **Q1 2024 Billing Code Update** to determine coverage and billing guidelines. The Iowa Medicaid coverage and billing information provided in this bulletin is effective **January 1, 2024**. This bulletin serves as a notice of the following information:

Table 1

- 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, 2024**.

Table 2

- New Current Dental Terminology (CDT[®]) 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, 2024**.

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 **N/A**.

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 **N/A**.

Table 5

- Modifiers included in the code update. Coverage and billing information for these codes applies to dates of service on or after **N/A**.

Table 6

- CPT[®], CDT[®], & HCPCS codes that would be considered Outpatient Hospital on or after **January 1, 2024**.

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, 2024**.

Table 8

- Deleted Codes - CPT[®], CDT[®], HCPCS, ICD-10-CM & ICD-10-PCS codes that have been discontinued effective **December 31, 2023**.

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 MCP with which the member is enrolled.

Iowa Medicaid Provider Services:

- Phone: 1-800-338-7909
- Email: imeproviderservices@dhs.state.ia.us

Wellpoint Iowa, Inc. (Formerly Amerigroup Iowa, Inc):

- Phone: 1-833-731-2143
- Email: ProviderSolutionsIA@wellpoint.com
- Website: <https://www.provider.wellpoint.com/iowa-provider/home>

Iowa Total Care:

- Phone: 1-833-404-1061
- Email: providerrelations@iowatotalcare.com
- Website: <https://www.iowatotalcare.com>

Molina Healthcare of Iowa:

- Phone: 1-844-236-1464
- Email: iaproviderrelations@molinahealthcare.com
- Website: <https://www.molinahealthcare.com/providers/ia/medicaid/home.aspx>
- Provider portal: <https://www.availity.com/molinahealthcare>

The **QI 2024** 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 www.cms.gov.

The QI 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 **January 1, 2024**.

Special Billing Information in Table I shows if the code requires a Prior Authorization or if it suspends for claim review. Nothing in the column indicates no special billing information.

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

Table 1 – CPT® & HCPCS Codes

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Code	Description (Table 1)	Effective Date	Special Billing Information
52284	Cystourethroscopy, with mechanical urethral dilation and urethral therapeutic drug delivery by drug-coated balloon catheter for urethral stricture or stenosis, male, including fluoroscopy, when performed	1/1/2024	
61889	Insertion of skull-mounted cranial neurostimulator pulse generator or receiver, including craniectomy or craniotomy, when performed, with direct or inductive coupling, with connection to depth and/or cortical strip electrode array(s)	1/1/2024	PA Required
61891	Revision or replacement of skull-mounted cranial neurostimulator pulse generator or receiver with connection to depth and/or cortical strip electrode array(s)	1/1/2024	PA Required
61892	Removal of skull-mounted cranial neurostimulator pulse generator or receiver with cranioplasty, when performed	1/1/2024	PA Required
76984	Ultrasound, intraoperative thoracic aorta (eg, epiaortic), diagnostic	1/1/2024	
76987	Intraoperative epicardial cardiac ultrasound (ie, echocardiography) for congenital heart disease, diagnostic; including placement and manipulation of transducer, image acquisition, interpretation and report	1/1/2024	
76988	Intraoperative epicardial cardiac ultrasound (ie, echocardiography) for congenital heart disease, diagnostic; placement, manipulation of transducer, and image acquisition only	1/1/2024	
76989	Intraoperative epicardial cardiac ultrasound (ie, echocardiography) for congenital heart disease, diagnostic; interpretation and report only	1/1/2024	
82166	Anti-mullerian hormone (AMH)	1/1/2024	
86041	Acetylcholine receptor (AChR); binding antibody	1/1/2024	
86042	Acetylcholine receptor (AChR); blocking antibody	1/1/2024	
86043	Acetylcholine receptor (AChR); modulating antibody	1/1/2024	
86366	Muscle-specific kinase (MuSK) antibody	1/1/2024	
87523	Infectious agent detection by nucleic acid (DNA or RNA); hepatitis D (delta), quantification, including reverse transcription, when performed	1/1/2024	
90589	Chikungunya virus vaccine, live attenuated, for intramuscular use	1/1/2024	
90623	Meningococcal pentavalent vaccine, conjugated Men A, C, W, Y-tetanus toxoid carrier, and Men B-FHbp, for intramuscular use	1/1/2024	
93584	Venography for congenital heart defect(s), including catheter placement, and radiological supervision and interpretation; anomalous or persistent superior vena cava when it exists as a second contralateral superior vena cava, with native drainage to heart (List separately in addition to code for primary procedure)	1/1/2024	
93585	Venography for congenital heart defect(s), including catheter placement, and radiological supervision and interpretation; azygos/hemiazygos venous system (List separately in addition to code for primary procedure)	1/1/2024	

Code	Description (Table I)	Effective Date	Special Billing Information
93586	Venography for congenital heart defect(s), including catheter placement, and radiological supervision and interpretation; coronary sinus (List separately in addition to code for primary procedure)	1/1/2024	
93587	Venography for congenital heart defect(s), including catheter placement, and radiological supervision and interpretation; venovenous collaterals originating at or above the heart (eg, from innominate vein) (List separately in addition to code for primary procedure)	1/1/2024	
93588	Venography for congenital heart defect(s), including catheter placement, and radiological supervision and interpretation; venovenous collaterals originating below the heart (eg, from the inferior vena cava) (List separately in addition to code for primary procedure)	1/1/2024	
97550	Caregiver training in strategies and techniques to facilitate the patient's functional performance in the home or community (eg, activities of daily living [ADLs], instrumental ADLs [iADLs], transfers, mobility, communication, swallowing, feeding, problem solving, safety practices) (without the patient present), face to face; initial 30 minutes	1/1/2024	
97551	Caregiver training in strategies and techniques to facilitate the patient's functional performance in the home or community (eg, activities of daily living [ADLs], instrumental ADLs [iADLs], transfers, mobility, communication, swallowing, feeding, problem solving, safety practices) (without the patient present), face to face; each additional 15 minutes (List separately in addition to code for primary service)	1/1/2024	
97552	Group caregiver training in strategies and techniques to facilitate the patient's functional performance in the home or community (eg, activities of daily living [ADLs], instrumental ADLs [iADLs], transfers, mobility, communication, swallowing, feeding, problem solving, safety practices) (without the patient present), face to face with multiple sets of caregivers	1/1/2024	
0427U	Monocyte distribution width, whole blood (List separately in addition to code for primary procedure)	1/1/2024	
0429U	Human papillomavirus (HPV), oropharyngeal swab, 14 high-risk types (ie, 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 66, and 68)	1/1/2024	
0784T	Insertion or replacement of percutaneous electrode array, spinal, with integrated neurostimulator, including imaging guidance, when performed	1/1/2024	PA Required
0785T	Revision or removal of neurostimulator electrode array, spinal, with integrated neurostimulator	1/1/2024	PA Required
0786T	Insertion or replacement of percutaneous electrode array, sacral, with integrated neurostimulator, including imaging guidance, when performed	1/1/2024	PA Required
0787T	Revision or removal of neurostimulator electrode array, sacral, with integrated neurostimulator	1/1/2024	PA Required
0814T	Percutaneous injection of calcium-based biodegradable osteoconductive material, proximal femur, including imaging guidance, unilateral	1/1/2024	PA Required
0815T	Ultrasound-based radiofrequency echographic multi-spectrometry (REMS), bone-density study and fracture-risk assessment, 1 or more sites, hips, pelvis, or spine	1/1/2024	PA Required

Code	Description (Table I)	Effective Date	Special Billing Information
0816T	Open insertion or replacement of integrated neurostimulation system for bladder dysfunction including electrode(s) (eg, array or leadless), and pulse generator or receiver, including analysis, programming, and imaging guidance, when performed, posterior tibial nerve; subcutaneous	1/1/2024	PA Required
0817T	Open insertion or replacement of integrated neurostimulation system for bladder dysfunction including electrode(s) (eg, array or leadless), and pulse generator or receiver, including analysis, programming, and imaging guidance, when performed, posterior tibial nerve; subfascial	1/1/2024	PA Required
0818T	Revision or removal of integrated neurostimulation system for bladder dysfunction, including analysis, programming, and imaging, when performed, posterior tibial nerve; subcutaneous	1/1/2024	PA Required
0819T	Revision or removal of integrated neurostimulation system for bladder dysfunction, including analysis, programming, and imaging, when performed, posterior tibial nerve; subfascial	1/1/2024	PA Required
0827T	Digitization of glass microscope slides for cytopathology, fluids, washings, or brushings, except cervical or vaginal; smears with interpretation (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0828T	Digitization of glass microscope slides for cytopathology, fluids, washings, or brushings, except cervical or vaginal; simple filter method with interpretation (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0829T	Digitization of glass microscope slides for cytopathology, concentration technique, smears, and interpretation (eg, Saccomanno technique) (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0830T	Digitization of glass microscope slides for cytopathology, selective-cellular enhancement technique with interpretation (eg, liquid-based slide preparation method), except cervical or vaginal (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0831T	Digitization of glass microscope slides for cytopathology, cervical or vaginal (any reporting system), requiring interpretation by physician (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0832T	Digitization of glass microscope slides for cytopathology, smears, any other source; screening and interpretation (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0833T	Digitization of glass microscope slides for cytopathology, smears, any other source; preparation, screening and interpretation (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0834T	Digitization of glass microscope slides for cytopathology, smears, any other source; extended study involving over 5 slides and/or multiple stains (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0835T	Digitization of glass microscope slides for cytopathology, evaluation of fine needle aspirate; immediate cytohistologic study to determine adequacy for diagnosis, first evaluation episode, each site (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0836T	Digitization of glass microscope slides for cytopathology, evaluation of fine needle aspirate; immediate cytohistologic study to determine adequacy for diagnosis, each separate additional evaluation episode, same site (List separately in addition to code for primary procedure)	1/1/2024	PA Required

Code	Description (Table I)	Effective Date	Special Billing Information
0837T	Digitization of glass microscope slides for cytopathology, evaluation of fine needle aspirate; interpretation and report (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0838T	Digitization of glass microscope slides for consultation and report on referred slides prepared elsewhere (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0839T	Digitization of glass microscope slides for consultation and report on referred material requiring preparation of slides (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0840T	Digitization of glass microscope slides for consultation, comprehensive, with review of records and specimens, with report on referred material (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0841T	Digitization of glass microscope slides for pathology consultation during surgery; first tissue block, with frozen section(s), single specimen (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0842T	Digitization of glass microscope slides for pathology consultation during surgery; each additional tissue block with frozen section(s) (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0843T	Digitization of glass microscope slides for pathology consultation during surgery; cytologic examination (eg, touch preparation, squash preparation), initial site (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0844T	Digitization of glass microscope slides for pathology consultation during surgery; cytologic examination (eg, touch preparation, squash preparation), each additional site (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0845T	Digitization of glass microscope slides for immunofluorescence, per specimen; initial single antibody stain procedure (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0846T	Digitization of glass microscope slides for immunofluorescence, per specimen; each additional single antibody stain procedure (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0847T	Digitization of glass microscope slides for examination and selection of retrieved archival (ie, previously diagnosed) tissue(s) for molecular analysis (eg, KRAS mutational analysis) (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0848T	Digitization of glass microscope slides for in situ hybridization (eg, FISH), per specimen; initial single probe stain procedure (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0849T	Digitization of glass microscope slides for in situ hybridization (eg, FISH), per specimen; each additional single probe stain procedure (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0850T	Digitization of glass microscope slides for in situ hybridization (eg, FISH), per specimen; each multiplex probe stain procedure (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0851T	Digitization of glass microscope slides for morphometric analysis, in situ hybridization (quantitative or semiquantitative), manual, per specimen; initial single probe stain procedure (List separately in addition to code for primary procedure)	1/1/2024	PA Required

Code	Description (Table I)	Effective Date	Special Billing Information
0852T	Digitization of glass microscope slides for morphometric analysis, in situ hybridization (quantitative or semiquantitative), manual, per specimen; each additional single probe stain procedure (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0853T	Digitization of glass microscope slides for morphometric analysis, in situ hybridization (quantitative or semiquantitative), manual, per specimen; each multiplex probe stain procedure (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0854T	Digitization of glass microscope slides for blood smear, peripheral, interpretation by physician with written report (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0855T	Digitization of glass microscope slides for bone marrow, smear interpretation (List separately in addition to code for primary procedure)	1/1/2024	PA Required
0856T	Digitization of glass microscope slides for electron microscopy, diagnostic (List separately in addition to code for primary procedure)	1/1/2024	PA Required
A4287	Disposable collection and storage bag for breast milk, any size, any type, each	1/1/2024	
A6520	Gradient compression garment, glove, padded, for nighttime use, each	1/1/2024	
A6521	Gradient compression garment, glove, padded, for nighttime use, custom, each	1/1/2024	
A6522	Gradient compression garment, arm, padded, for nighttime use, each	1/1/2024	
A6523	Gradient compression garment, arm, padded, for nighttime use, custom, each	1/1/2024	
A6524	Gradient compression garment, lower leg and foot, padded, for nighttime use, each	1/1/2024	
A6525	Gradient compression garment, lower leg and foot, padded, for nighttime use, custom, each	1/1/2024	
A6526	Gradient compression garment, full leg and foot, padded, for nighttime use, each	1/1/2024	
A6527	Gradient compression garment, full leg and foot, padded, for nighttime use, custom, each	1/1/2024	
A6528	Gradient compression garment, bra, for nighttime use, each	1/1/2024	
A6529	Gradient compression garment, bra, for nighttime use, custom, each	1/1/2024	
A6552	Gradient compression stocking, below knee, 30-40 mmhg, each	1/1/2024	
A6553	Gradient compression stocking, below knee, 30-40 mmhg, custom, each	1/1/2024	
A6554	Gradient compression stocking, below knee, 40 mmhg or greater, each	1/1/2024	
A6555	Gradient compression stocking, below knee, 40 mmhg or greater, custom, each	1/1/2024	
A6556	Gradient compression stocking, thigh length, 18-30 mmhg, custom, each	1/1/2024	
A6557	Gradient compression stocking, thigh length, 30-40 mmhg, custom, each	1/1/2024	
A6558	Gradient compression stocking, thigh length, 40 mmhg or greater, custom, each	1/1/2024	
A6559	Gradient compression stocking, full length/chap style, 18-30 mmhg, custom, each	1/1/2024	
A6560	Gradient compression stocking, full length/chap style, 30-40 mmhg, custom, each	1/1/2024	
A6561	Gradient compression stocking, full length/chap style, 40 mmhg or greater, custom, each	1/1/2024	

Code	Description (Table I)	Effective Date	Special Billing Information
A6562	Gradient compression stocking, waist length, 18-30 mmhg, custom, each	1/1/2024	
A6563	Gradient compression stocking, waist length, 30-40 mmhg, custom, each	1/1/2024	
A6564	Gradient compression stocking, waist length, 40 mmhg or greater, custom, each	1/1/2024	
A6565	Gradient compression gauntlet, custom, each	1/1/2024	
A6566	Gradient compression garment, neck/head, each	1/1/2024	
A6567	Gradient compression garment, neck/head, custom, each	1/1/2024	
A6568	Gradient compression garment, torso and shoulder, each	1/1/2024	
A6569	Gradient compression garment, torso/shoulder, custom, each	1/1/2024	
A6570	Gradient compression garment, genital region, each	1/1/2024	
A6571	Gradient compression garment, genital region, custom, each	1/1/2024	
A6572	Gradient compression garment, toe caps, each	1/1/2024	
A6573	Gradient compression garment, toe caps, custom, each	1/1/2024	
A6574	Gradient compression arm sleeve and glove combination, custom, each	1/1/2024	
A6575	Gradient compression arm sleeve and glove combination, each	1/1/2024	
A6576	Gradient compression arm sleeve, custom, medium weight, each	1/1/2024	
A6577	Gradient compression arm sleeve, custom, heavy weight, each	1/1/2024	
A6578	Gradient compression arm sleeve, each	1/1/2024	
A6579	Gradient compression glove, custom, medium weight, each	1/1/2024	
A6580	Gradient compression glove, custom, heavy weight, each	1/1/2024	
A6581	Gradient compression glove, each	1/1/2024	
A6582	Gradient compression gauntlet, each	1/1/2024	
A6583	Gradient compression wrap with adjustable straps, below knee, 30-50 mmhg, each	1/1/2024	
A6584	Gradient compression wrap with adjustable straps, not otherwise specified	1/1/2024	
A6585	Gradient pressure wrap with adjustable straps, above knee, each	1/1/2024	
A6586	Gradient pressure wrap with adjustable straps, full leg, each	1/1/2024	
A6587	Gradient pressure wrap with adjustable straps, foot, each	1/1/2024	
A6588	Gradient pressure wrap with adjustable straps, arm, each	1/1/2024	
A6589	Gradient pressure wrap with adjustable straps, bra, each	1/1/2024	
A6593	Accessory for gradient compression garment or wrap with adjustable straps, not-otherwise specified	1/1/2024	
A6594	Gradient compression bandaging supply, bandage liner, lower extremity, any size or length, each	1/1/2024	
A6595	Gradient compression bandaging supply, bandage liner, upper extremity, any size or length, each	1/1/2024	
A6596	Gradient compression bandaging supply, conforming gauze, per linear yard, any width, each	1/1/2024	
A6597	Gradient compression bandage roll, elastic long stretch, per linear yard, any width, each	1/1/2024	

Code	Description (Table I)	Effective Date	Special Billing Information
A6598	Gradient compression bandage roll, elastic medium stretch, per linear yard, any width, each	1/1/2024	
A6599	Gradient compression bandage roll, inelastic short stretch, per linear yard, any width, each	1/1/2024	
A6600	Gradient compression bandaging supply, high density foam sheet, per 250 square centimeters, each	1/1/2024	
A6601	Gradient compression bandaging supply, high density foam pad, any size or shape, each	1/1/2024	
A6602	Gradient compression bandaging supply, high density foam roll for bandage, per linear yard, any width, each	1/1/2024	
A6603	Gradient compression bandaging supply, low density channel foam sheet, per 250 square centimeters, each	1/1/2024	
A6604	Gradient compression bandaging supply, low density flat foam sheet, per 250 square centimeters, each	1/1/2024	
A6605	Gradient compression bandaging supply, padded foam, per linear yard, any width, each	1/1/2024	
A6606	Gradient compression bandaging supply, padded textile, per linear yard, any width, each	1/1/2024	
A6607	Gradient compression bandaging supply, tubular protective absorption layer, per linear yard, any width, each	1/1/2024	
A6608	Gradient compression bandaging supply, tubular protective absorption padded layer, per linear yard, any width, each	1/1/2024	
A6609	Gradient compression bandaging supply, not otherwise specified	1/1/2024	
A6610	Gradient compression stocking, below knee, 18-30 mmhg, custom, each	1/1/2024	
A9608	Flutofolastat f18, diagnostic, 1 millicurie	1/1/2024	
A9609	Fludeoxyglucose f18 up to 15 millicuries	1/1/2024	
C7560	Endoscopic retrograde cholangiopancreatography (ERCP) with removal of foreign body(s) or stent(s) from biliary/pancreatic duct(s) and endoscopic cannulation of papilla with direct visualization of pancreatic/common bile duct(s)	1/1/2024	
C9159	Injection, prothrombin complex concentrate (human), balfaxar, per i.u. of factor ix activity	1/1/2024	
C9161	Injection, aflibercept hd, 1 mg	1/1/2024	
C9162	Injection, avacincaptad pegol, 0.1 mg	1/1/2024	PA Required
C9163	Injection, talquetamab-tgvs, 0.25 mg	1/1/2024	PA Required
C9164	Cantharidin for topical administration, 0.7%, single unit dose applicator (3.2 mg)	1/1/2024	PA Required
C9165	Injection, elranatamab-bcmm, 1 mg	1/1/2024	PA Required
C9794	Therapeutic radiology simulation-aided field setting; complex, including acquisition of pet and ct imaging data required for radiopharmaceutical-directed radiation therapy treatment planning (i.e., modeling)	1/1/2024	
C9795	Stereotactic body radiation therapy, treatment delivery, per fraction to 1 or more lesions, including image guidance and real-time positron emissions-based delivery adjustments to 1 or more lesions, entire course not to exceed 5 fractions	1/1/2024	
G0011	Individual counseling for pre-exposure prophylaxis (PrEP) by physician or qualified health care professional (QHP) to prevent human immunodeficiency virus (HIV), includes HIV risk assessment (initial or continued assessment of risk), HIV risk reduction and medication adherence, 15-30 minutes	1/1/2024	

Code	Description (Table I)	Effective Date	Special Billing Information
G0012	Injection of pre-exposure prophylaxis (PrEP) drug for HIV prevention, under skin or into muscle	1/1/2024	
G0013	Individual counseling for pre-exposure prophylaxis (PrEP) by clinical staff to prevent human immunodeficiency virus (HIV), includes: HIV risk assessment (initial or continued assessment of risk), HIV risk reduction and medication adherence	1/1/2024	
G0017	Psychotherapy for crisis furnished in an applicable site of service (any place of service at which the non-facility rate for psychotherapy for crisis services applies, other than the office setting); first 60 minutes	1/1/2024	
G0018	(Psychotherapy for crisis furnished in an applicable site of service (any place of service at which the non-facility rate for psychotherapy for crisis services applies, other than the office setting); each additional 30 minutes (List separately in addition to code for primary service)	1/1/2024	
G0136	Administration of a standardized, evidence-based Social Determinants of Health Risk Assessment tool, 5-15 minutes	1/1/2024	
J0184	Injection, amisulpride, 1 mg	1/1/2024	
J0217	Injection, velmanase alfa-tycv, 1 mg	1/1/2024	
J0391	Injection, artesunate, 1 mg	1/1/2024	
J0402	Injection, aripiprazole, (abilify asimtufii), 1 mg	1/1/2024	
J0576	Injection, buprenorphine extended-release (brixadi), 1 mg	1/1/2024	
J0688	Injection, cefazolin sodium (hikma), not therapeutically equivalent to J0690, 500 mg	1/1/2024	
J0750	Emtricitabine 200 mg and tenofovir disoproxil fumarate 300 mg, oral	1/1/2024	
J0751	Emtricitabine 200mg and tenofovir alafenamide 25mg, oral	1/1/2024	
J0799	FDA approved prescription drug, only for use as HIV pre-exposure prophylaxis, not otherwise classified	1/1/2024	
J0873	Injection, daptomycin (xellia) not therapeutically equivalent to J0878, 1 mg	1/1/2024	
J1105	Dexmedetomidine, oral, 1 mcg	1/1/2024	
J1304	Injection, tofersen, 1 mg	1/1/2024	PA Required
J1412	Injection, valoctocogene roxaparvovec-rvox, per mL, containing nominal 2×10^{13} vector genome	1/1/2024	PA Required
J1413	Injection, delandistrogene moxeparvovec-rokl, per therapeutic dose	1/1/2024	PA Required
J1596	Injection, glycopyrrolate, 0.1 mg	1/1/2024	
J1939	Injection, bumetanide, 0.5 mg	1/1/2024	
J2403	Chloroprocaine hcl ophthalmic, 3% gel, 1 mg	1/1/2024	
J2404	Injection, nifedipine, 0.1 mg	1/1/2024	
J2508	Injection, pegunigalsidase alfa-iwxj, 1 mg	1/1/2024	PA Required
J2679	Injection, fluphenazine hcl, 1.25 mg	1/1/2024	
J2799	Injection, risperidone, (uzedy), 1 mg	1/1/2024	

Code	Description (Table I)	Effective Date	Special Billing Information
J3401	Beremagene geperpavec-svdt for topical administration, containing nominal 5×10^9 pfu/ml vector genomes, per 0.1 mL	1/1/2024	PA Required
J3425	Injection, hydroxocobalamin, 10 mcg	1/1/2024	
J9052	Injection, carmustine (accord), not therapeutically equivalent to J9050, 100 mg	1/1/2024	
J9072	Injection, cyclophosphamide, (dr. reddy's), 5 mg	1/1/2024	
J9172	Injection, docetaxel (ingenus) not therapeutically equivalent to J9171, 1 mg	1/1/2024	
J9255	Injection, methotrexate (accord) not therapeutically equivalent to J9250 or J9260, 50 mg	1/1/2024	
J9258	Injection, paclitaxel protein-bound particles (teva) not therapeutically equivalent to J9264, 1 mg	1/1/2024	
J9286	Injection, glofitamab-gxbm, 2.5 mg	1/1/2024	PA Required
J9321	Injection, epcoritamab-bysp, 0.16 mg	1/1/2024	PA Required
J9324	Injection, pemetrexed (pemrydi rtu), 10 mg	1/1/2024	
J9333	Injection, rozanolixizumab-noli, 1 mg	1/1/2024	PA Required
J9334	Injection, efgartigimod alfa, 2 mg and hyaluronidase-qvfc	1/1/2024	PA Required
L5926	Addition to lower extremity prosthesis, endoskeletal, knee disarticulation, above knee, hip disarticulation, positional rotation unit, any type	1/1/2024	
Q5132	Injection, adalimumab-afzb (abrilada), biosimilar, 10 mg	1/1/2024	

*Covid Related Code

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Table 2 – CDT©

Code	Description	Effective Date
D6089	Accessing and retorquing loose implant screw - per screw	1/1/2024
D7284	Excisional biopsy of minor salivary glands	1/1/2024

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Table 3 – ICD-10-CM Codes

Code	Description	Effective Date
N/A	N/A	N/A

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Table 4 - ICD-10-PCS Codes

Code	Description	Effective Date
N/A	N/A	N/A

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Table 5 – Modifiers

Modifier	Description	Effective Date
N/A	N/A	N/A

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Table 6 – Outpatient Hospital

Code	Description (Table 6)	Effective Date
52284	Drug delivery using a drug-coated balloon for male treatment of urethral stricture using an endoscope	1/1/2024
61889	Insertion of skull-mounted cranial neurostimulator pulse generator or receiver	1/1/2024
61891	Revision or replacement of skull-mounted cranial neurostimulator pulse generator or receiver	1/1/2024
61892	Removal of skull-mounted cranial neurostimulator pulse generator or receiver	1/1/2024
76984	Ultrasound of chest aorta during surgery	1/1/2024
76987	Ultrasound of heart during surgery to evaluate for congenital heart disease, including placement and manipulation of transducer, image acquisition, and interpretation and report of results	1/1/2024
76988	Ultrasound of heart during surgery to evaluate for congenital heart disease, including placement and manipulation of transducer and image acquisition	1/1/2024
76989	Ultrasound of heart during surgery to evaluate for congenital heart disease, interpretation and report of results only	1/1/2024
90589	Chikungunya virus vaccine, live attenuated, for intramuscular use	1/1/2024
90623	Analysis, programming, and verification of sound processor for bone-anchored inner ear implant, each additional 15 minutes	1/1/2024
93584	Review by radiologist of vein imaging for congenital heart defect of superior vena cava	1/1/2024
93585	Review by radiologist of vein imaging for congenital heart defect of the azygos/hemiazygos venous system	1/1/2024
93586	Review by radiologist of vein imaging for congenital heart defect of coronary sinus	1/1/2024
93587	Review by radiologist of vein imaging for congenital heart defect of venovenous collaterals above the heart	1/1/2024
93588	Review by radiologist of vein imaging for congenital heart defect of venovenous collaterals below the heart	1/1/2024
97550	Caregiver training in strategies and techniques to facilitate the patient's functional performance in the home or community, initial 30 minutes	1/1/2024
97551	Caregiver training in strategies and techniques to facilitate the patient's functional performance in the home or community, each additional 15 minutes	1/1/2024
97552	Group caregiver training in strategies and techniques to facilitate the patient's functional performance in the home or community	1/1/2024
0427U	Monocyte distribution width, whole blood (list separately in addition to code for primary procedure)	1/1/2024
0429U	Human papillomavirus (hpv), oropharyngeal swab, 14 high-risk types (ie, 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 66, and 68)	1/1/2024
0784T	Insertion or replacement of spinal integrated nerve stimulating system with electrode array, accessed through the skin	1/1/2024

Code	Description (Table 6)	Effective Date
0785T	Revision or removal of spinal integrated nerve stimulating system with electrode array	1/1/2024
0786T	Insertion or replacement of sacral integrated never stimulating system with electrode array, accessed through the skin	1/1/2024
0787T	Revision or removal of sacral integrated nerve stimulating system with electrode array	1/1/2024
0814T	Injection through the skin of calcium-based osteoconductive material to repair upper thigh bone	1/1/2024
0815T	Ultrasound-based radiofrequency echographic multi-spectrometry scan for measuring bone loss in hips, pelvis, or spine	1/1/2024
0816T	Insertion or replacement of integrated posterior tibial nerve stimulating system under the skin, for bladder dysfunction	1/1/2024
0817T	Insertion or replacement of integrated posterior tibial nerve stimulating system under muscle, for bladder dysfunction	1/1/2024
0818T	Revision or removal of integrated posterior nerve stimulating system under skin, for bladder dysfunction	1/1/2024
0819T	Revision or removal of integrated posterior nerve stimulating system under muscle, for bladder dysfunction	1/1/2024
0827T	Digitization of glass microscope slides for cytopathology of fluids, washings, or brushings, smears	1/1/2024
0828T	Digitization of glass microscope slides for cytopathology of fluids, washings, or brushings, simple filter method	1/1/2024
0829T	Digitization of glass microscope slides for cytopathology, concentration technique	1/1/2024
0830T	Digitization of glass microscope slides for cytopathology, selective-cellular enhancement technique	1/1/2024
0831T	Digitization of glass microscope slides for cytopathology of cervical or vaginal specimen	1/1/2024
0832T	Digitization of glass microscope slides for cytopathology, smears requiring screening and interpretation	1/1/2024
0833T	Digitization of glass microscope slides for cytopathology, smears requiring preparation, screening and interpretation	1/1/2024
0834T	Digitization of glass microscope slides for cytopathology, smears requiring extended study of over 5 slides and/or multiple stains	1/1/2024
0835T	Digitization of glass microscope slides for cytopathology evaluation of fine needle aspirate, first evaluation	1/1/2024
0836T	Digitization of glass microscope slides for cytopathology evaluation of fine needle aspirate, each additional evaluation	1/1/2024
0837T	Digitization of glass microscope slides for cytopathology evaluation of fine needle aspirate	1/1/2024
0838T	Digitization of glass microscope slides for consultation and report on slides prepared elsewhere	1/1/2024
0839T	Digitization of glass microscope slides for consultation and report requiring preparation of slides using referred material	1/1/2024
0840T	Digitization of glass microscope slides for consultation, comprehensive review	1/1/2024
0841T	Digitization of glass microscope slides for pathology consultation during surgery, first tissue block	1/1/2024
0842T	Digitization of glass microscope slides for pathology consultation during surgery, each additional tissue block	1/1/2024
0843T	Digitization of glass microscope slides for pathology consultation during surgery, cytologic examination of initial site	1/1/2024
0844T	Digitization of glass microscope slides for pathology consultation during surgery, cytologic examination of each additional site	1/1/2024
0845T	Digitization of glass microscope slides for immunofluorescence, initial single antibody stain procedure	1/1/2024
0846T	Digitization of glass microscope slides for immunofluorescence, each additional antibody stain procedure	1/1/2024
0847T	Digitization of glass microscope slides for examination and selection of retrieved archival tissue(s) for molecular analysis	1/1/2024
0848T	Digitization of glass microscope slides for in situ hybridization, initial single probe stain procedure	1/1/2024
0849T	Digitization of glass microscope slides for in situ hybridization, each additional single probe stain procedure	1/1/2024

Code	Description (Table 6)	Effective Date
0850T	Digitization of glass microscope slides for in situ hybridization, each multiplex probe stain procedure	1/1/2024
0851T	Digitization of glass microscope slides for morphometric analysis, in situ hybridization, initial manual single probe stain procedure	1/1/2024
0852T	Digitization of glass microscope slides for morphometric analysis, in situ hybridization, each additional manual single probe stain procedure	1/1/2024
0853T	Digitization of glass microscope slides for morphometric analysis, in situ hybridization, each manual multiplex probe stain procedure	1/1/2024
0854T	Digitization of glass microscope slides for peripheral blood smear	1/1/2024
0855T	Digitization of glass microscope slides for bone marrow smear	1/1/2024
0856T	Digitization of glass microscope slides for diagnostic electron microscopy	1/1/2024
A9608	Flutofolastat f 18, diagnostic, 1 millicurie	1/1/2024
A9609	Fludeoxyglucose f18 up to 15 millicuries	1/1/2024
C7560	Endoscopic retrograde cholangiopancreatography with removal of foreign body(s) or stent(s) from biliary/pancreatic duct(s) and endoscopic cannulation of papilla with direct visualization of pancreatic/common bile duct(s)	1/1/2024
C9159	Injection, prothrombin complex concentrate (human), balfaxar, per i.u. of factor ix activity	1/1/2024
C9161	Injection, aflibercept hd, 1 mg	1/1/2024
C9162	Injection, avacincaptad pegol, 0.1 mg	1/1/2024
C9163	Injection, talquetamab-tgvs, 0.25 mg	1/1/2024
C9164	Cantharidin for topical administration, 0.7%, single unit dose applicator (3.2 mg)	1/1/2024
C9165	Injection, elranatamab-bcmm, 1 mg	1/1/2024
C9794	Therapeutic radiology simulation-aided field setting; complex, including acquisition of pet and ct imaging data required for radiopharmaceutical-directed radiation therapy treatment planning (i.e., modeling)	1/1/2024
C9795	Stereotactic body radiation therapy, tx delivery, per fraction to 1 or > lesions, including image guidance & real-time positron emissions-based delivery adjustments to 1 or > lesions, entire course not to exceed 5 fractions	1/1/2024
G0011	Individual counseling for pre-exposure prophylaxis by physician or qualified health care professional to prevent human immunodeficiency virus, includes HIV risk assessment, HIV risk reduction and med adherence, 15-30 min	1/1/2024
G0012	Injection of pre-exposure prophylaxis (prep) drug for HIV prevention, under skin or into muscle	1/1/2024
G0013	Individual counseling for pre-exposure prophylaxis by clinical staff to prevent human immunodeficiency virus, includes: HIV risk assessment, HIV risk reduction and medication adherence	1/1/2024
G0136	Administration of a standardized, evidence-based social determinants of health risk assessment tool, 5-15 minutes	1/1/2024
J0184	Injection, amisulpride, 1 mg	1/1/2024
J0217	Injection, velmanase alfa-tycv, 1 mg	1/1/2024
J0391	Injection, artesunate, 1 mg	1/1/2024
J0402	Injection, aripiprazole (abilify asimtufig), 1 mg	1/1/2024

Code	Description (Table 6)	Effective Date
J0576	Injection, buprenorphine extended-release (brixadi), 1 mg	1/1/2024
J0688	Injection, cefazolin sodium (hikma), not therapeutically equivalent to j0690, 500 mg	1/1/2024
J0750	Emtricitabine 200mg and tenofovir disoproxil fumarate 300mg, oral, fda approved prescription, only for use as HIV pre-exposure prophylaxis (not for use as treatment of HIV)	1/1/2024
J0751	Emtricitabine 200mg and tenofovir alafenamide 25mg, oral, fda approved prescription, only for use as HIV pre-exposure prophylaxis (not for use as treatment of HIV)	1/1/2024
J0799	Fda approved prescription drug, only for use as HIV pre-exposure prophylaxis (not for use as treatment of HIV), not otherwise classified	1/1/2024
J0873	Injection, daptomycin (xellia) not therapeutically equivalent to j0878, 1 mg	1/1/2024
J1105	Dexmedetomidine, oral, 1 mcg	1/1/2024
J1304	Injection, tofersen, 1 mg	1/1/2024
J1412	Injection, valoctocogene roxaparvovec-rvox, per ml, containing nominal 2×10^{13} vector genomes	1/1/2024
J1413	Injection, delandistrogene moxeparvovec-rokl, per therapeutic dose	1/1/2024
J1596	Injection, glycopyrrolate, 0.1 mg	1/1/2024
J1939	Injection, bumetanide, 0.5 mg	1/1/2024
J2403	Chloroprocaine hcl ophthalmic, 3% gel, 1 mg	1/1/2024
J2404	Injection, nicardipine, 0.1 mg	1/1/2024
J2508	Injection, pegunigalsidase alfa-iwxj, 1 mg	1/1/2024
J2679	Injection, fluphenazine hcl, 1.25 mg	1/1/2024
J2799	Injection, risperidone (uzedy), 1 mg	1/1/2024
J3401	Beremagene geperpavec-svdt for topical administration, containing nominal 5×10^9 pfu/ml vector genomes, per 0.1 ml	1/1/2024
J3425	Injection, hydroxocobalamin, 10 mcg	1/1/2024
J9052	Injection, carmustine (accord), not therapeutically equivalent to j9050, 100 mg	1/1/2024
J9072	Injection, cyclophosphamide, (dr. reddy's), 5 mg	1/1/2024
J9172	Injection, docetaxel (ingenus) not therapeutically equivalent to j9171, 1 mg	1/1/2024
J9255	Injection, methotrexate (accord) not therapeutically equivalent to j9250 and j9260, 50 mg	1/1/2024
J9258	Injection, paclitaxel protein-bound particles (teva) not therapeutically equivalent to j9264, 1 mg	1/1/2024
J9286	Injection, glofitamab-gxbm, 2.5 mg	1/1/2024
J9321	Injection, epcoritamab-bysp, 0.16 mg	1/1/2024
J9324	Injection, pemetrexed (pemrydi rtu), 10 mg	1/1/2024
J9333	Injection, rozanolixizumab-noli, 1 mg	1/1/2024
J9334	Injection, efgartigimod alfa, 2 mg and hyaluronidase-qvfc	1/1/2024
Q5132	Injection, adalimumab-afzb (abrilada), biosimilar, 10 mg	1/1/2024

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Table 7 – Non-covered codes

Code	Description (Table 7)
22836	Anterior thoracic vertebral body tethering, including thoracoscopy, when performed; up to 7 vertebral segments
22837	Anterior thoracic vertebral body tethering, including thoracoscopy, when performed; 8 or more vertebral segments
22838	Revision (eg, augmentation, division of tether), replacement, or removal of thoracic vertebral body tethering, including thoracoscopy, when performed
27278	Arthrodesis, sacroiliac joint, percutaneous, with image guidance, including placement of intra-articular implant(s) (eg, bone allograft[s], synthetic device[s]), without placement of transfixation device
31242	Nasal/sinus endoscopy, surgical; with destruction by radiofrequency ablation, posterior nasal nerve
31243	Nasal/sinus endoscopy, surgical; with destruction by cryoablation, posterior nasal nerve
33276	Insertion of phrenic nerve stimulator system (pulse generator and stimulating lead[s]), including vessel catheterization, all imaging guidance, and pulse generator initial analysis with diagnostic mode activation, when performed
33277	Insertion of phrenic nerve stimulator transvenous sensing lead (List separately in addition to code for primary procedure)
33278	Removal of phrenic nerve stimulator, including vessel catheterization, all imaging guidance, and interrogation and programming, when performed; system, including pulse generator and lead(s)
33279	Removal of phrenic nerve stimulator, including vessel catheterization, all imaging guidance, and interrogation and programming, when performed; transvenous stimulation or sensing lead(s) only
33280	Removal of phrenic nerve stimulator, including vessel catheterization, all imaging guidance, and interrogation and programming, when performed; pulse generator only
33281	Repositioning of phrenic nerve stimulator transvenous lead(s)
33287	Removal and replacement of phrenic nerve stimulator, including vessel catheterization, all imaging guidance, and interrogation and programming, when performed; pulse generator
33288	Removal and replacement of phrenic nerve stimulator, including vessel catheterization, all imaging guidance, and interrogation and programming, when performed; transvenous stimulation or sensing lead(s)
58580	Transcervical ablation of uterine fibroid(s), including intraoperative ultrasound guidance and monitoring, radiofrequency
64596	Insertion or replacement of percutaneous electrode array, peripheral nerve, with integrated neurostimulator, including imaging guidance, when performed; initial electrode array
64597	Insertion or replacement of percutaneous electrode array, peripheral nerve, with integrated neurostimulator, including imaging guidance, when performed; each additional electrode array (List separately in addition to code for primary procedure)
64598	Revision or removal of neurostimulator electrode array, peripheral nerve, with integrated neurostimulator
67516	Suprachoroidal space injection of pharmacologic agent (separate procedure)
75580	Noninvasive estimate of coronary fractional flow reserve (FFR) derived from augmentative software analysis of the data set from a coronary computed tomography angiography, with interpretation and report by a physician or other qualified health care professional
81457	Solid organ neoplasm, genomic sequence analysis panel, interrogation for sequence variants; DNA analysis, microsatellite instability

Code	Description (Table 7)
81458	Solid organ neoplasm, genomic sequence analysis panel, interrogation for sequence variants; DNA analysis, copy number variants and microsatellite instability
81459	Solid organ neoplasm, genomic sequence analysis panel, interrogation for sequence variants; DNA analysis or combined DNA and RNA analysis, copy number variants, microsatellite instability, tumor mutation burden, and rearrangements
81462	Solid organ neoplasm, genomic sequence analysis panel, cell-free nucleic acid (eg, plasma), interrogation for sequence variants; DNA analysis or combined DNA and RNA analysis, copy number variants and rearrangements
81463	Solid organ neoplasm, genomic sequence analysis panel, cell-free nucleic acid (eg, plasma), interrogation for sequence variants; DNA analysis, copy number variants, and microsatellite instability
81464	Solid organ neoplasm, genomic sequence analysis panel, cell-free nucleic acid (eg, plasma), interrogation for sequence variants; DNA analysis or combined DNA and RNA analysis, copy number variants, microsatellite instability, tumor mutation burden, and rearrangements
81517	Liver disease, analysis of 3 biomarkers (hyaluronic acid [HA], procollagen III amino terminal peptide [PIIINP], tissue inhibitor of metalloproteinase I [TIMP-I]), using immunoassays, utilizing serum, prognostic algorithm reported as a risk score and risk of liver fibrosis and liver-related clinical events within 5 years
90683	Respiratory syncytial virus vaccine, mRNA lipid nanoparticles, for intramuscular use
92972	Percutaneous transluminal coronary lithotripsy (List separately in addition to code for primary procedure)
93150	Therapy activation of implanted phrenic nerve stimulator system, including all interrogation and programming
93151	Interrogation and programming (minimum one parameter) of implanted phrenic nerve stimulator system
93152	Interrogation and programming of implanted phrenic nerve stimulator system during polysomnography
93153	Interrogation without programming of implanted phrenic nerve stimulator system
96547	Intraoperative hyperthermic intraperitoneal chemotherapy (HIPEC) procedure, including separate incision(s) and closure, when performed; first 60 minutes (List separately in addition to code for primary procedure)
96548	Intraoperative hyperthermic intraperitoneal chemotherapy (HIPEC) procedure, including separate incision(s) and closure, when performed; each additional 30 minutes (List separately in addition to code for primary procedure)
97037	Application of a modality to 1 or more areas; low-level laser therapy (ie, nonthermal and non-ablative) for post-operative pain reduction
99459	Pelvic examination (List separately in addition to code for primary procedure)
0420U	Oncology (urothelial), mRNA expression profiling by real-time quantitative PCR of MDK, HOXA13, CDC2, IGFBP5, and CXCR2 in combination with droplet digital PCR (ddPCR) analysis of 6 single-nucleotide polymorphisms (SNPs) genes TERT and FGFR3, urine, algorithm reported as a risk score for urothelial carcinoma
0421U	Oncology (colorectal) screening, quantitative real-time target and signal amplification of 8 RNA markers (GAPDH, SMAD4, ACY1, AREG, CDH1, KRAS, TNFRSF10B, EGLN2) and fecal hemoglobin, algorithm reported as a positive or negative for colorectal cancer risk
0422U	Oncology (pan-solid tumor), analysis of DNA biomarker response to anti-cancer therapy using cell-free circulating DNA, biomarker comparison to a previous baseline pre-treatment cell-free circulating DNA analysis using next-generation sequencing, algorithm reported as a quantitative change from baseline, including specific alterations, if appropriate

Code	Description (Table 7)
0423U	Psychiatry (eg, depression, anxiety), genomic analysis panel, including variant analysis of 26 genes, buccal swab, report including metabolizer status and risk of drug toxicity by condition
0424U	Oncology (prostate), exosomebased analysis of 53 small noncoding RNAs (sncRNAs) by quantitative reverse transcription polymerase chain reaction (RTqPCR), urine, reported as no molecular evidence, low-, moderate- or elevated-risk of prostate cancer
0425U	Genome (eg, unexplained constitutional or heritable disorder or syndrome), rapid sequence analysis, each comparator genome (eg, parents, siblings)
0426U	Genome (eg, unexplained constitutional or heritable disorder or syndrome), ultra-rapid sequence analysis
0428U	Oncology (breast), targeted hybrid-capture genomic sequence analysis panel, circulating tumor DNA (ctDNA) analysis of 56 or more genes, interrogation for sequence variants, gene copy number amplifications, gene rearrangements, microsatellite instability, and tumor mutation burden
0430U	Gastroenterology, malabsorption evaluation of alpha-1-antitrypsin, calprotectin, pancreatic elastase and reducing substances, feces, quantitative
0431U	Glycine receptor alpha I IgG, serum or cerebrospinal fluid (CSF), live cell-binding assay (LCBA), qualitative
0432U	Kelch-like protein 11 (KLHL11) antibody, serum or cerebrospinal fluid (CSF), cell-binding assay, qualitative
0433U	Oncology (prostate), 5 DNA regulatory markers by quantitative PCR, whole blood, algorithm, including prostate-specific antigen, reported as likelihood of cancer
0434U	Drug metabolism (adverse drug reactions and drug response), genomic analysis panel, variant analysis of 25 genes with reported phenotypes
0435U	Oncology, chemotherapeutic drug cytotoxicity assay of cancer stem cells (CSCs), from cultured CSCs and primary tumor cells, categorical drug response reported based on cytotoxicity percentage observed, minimum of 14 drugs or drug combinations
0436U	Oncology (lung), plasma analysis of 388 proteins, using aptamerbased proteomics technology, predictive algorithm reported as clinical benefit from immune checkpoint inhibitor therapy
0437U	Psychiatry (anxiety disorders), mRNA, gene expression profiling by RNA sequencing of 15 biomarkers, whole blood, algorithm reported as predictive risk score
0438U	Drug metabolism (adverse drug reactions and drug response), buccal specimen, gene-drug interactions, variant analysis of 33 genes, including deletion/duplication analysis of CYP2D6, including reported phenotypes and impacted genedrug interactions
0788T	Electronic analysis with simple programming of implanted integrated neurostimulation system (eg, electrode array and receiver), including contact group(s), amplitude, pulse width, frequency (Hz), on/off cycling, burst, dose lockout, patient-selectable parameters, responsive neurostimulation, detection algorithms, closed-loop parameters, and passive parameters, when performed by physician or other qualified health care professional, spinal cord or sacral nerve, 1-3 parameters
0789T	Electronic analysis with complex programming of implanted integrated neurostimulation system (eg, electrode array and receiver), including contact group(s), amplitude, pulse width, frequency (Hz), on/off cycling, burst, dose lockout, patient-selectable parameters, responsive neurostimulation, detection algorithms, closed-loop parameters, and passive parameters, when performed by physician or other qualified health care professional, spinal cord or sacral nerve, 4 or more parameters
0790T	Revision (eg, augmentation, division of tether), replacement, or removal of thoracolumbar or lumbar vertebral body tethering, including thoracoscopy, when performed

Code	Description (Table 7)
0811T	Remote multi-day complex uroflowmetry (eg, calibrated electronic equipment); set-up and patient education on use of equipment
0812T	Remote multi-day complex uroflowmetry (eg, calibrated electronic equipment); device supply with automated report generation, up to 10 days
0813T	Esophagogastroduodenoscopy, flexible, transoral, with volume adjustment of intragastric bariatric balloon
0820T	Continuous in-person monitoring and intervention (eg, psychotherapy, crisis intervention), as needed, during psychedelic medication therapy; first physician or other qualified health care professional, each hour
0821T	Continuous in-person monitoring and intervention (eg, psychotherapy, crisis intervention), as needed, during psychedelic medication therapy; second physician or other qualified health care professional, concurrent with first physician or other qualified health care professional, each hour (List separately in addition to code for primary procedure)
0822T	Continuous in-person monitoring and intervention (eg, psychotherapy, crisis intervention), as needed, during psychedelic medication therapy; clinical staff under the direction of a physician or other qualified health care professional, concurrent with first physician or other qualified health care professional, each hour (List separately in addition to code for primary procedure)
0823T	Transcatheter insertion of permanent single-chamber leadless pacemaker, right atrial, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography and/or right ventriculography, femoral venography, cavography) and device evaluation (eg, interrogation or programming), when performed
0824T	Transcatheter removal of permanent single-chamber leadless pacemaker, right atrial, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography and/or right ventriculography, femoral venography, cavography), when performed
0825T	Transcatheter removal and replacement of permanent single-chamber leadless pacemaker, right atrial, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography and/or right ventriculography, femoral venography, cavography) and device evaluation (eg, interrogation or programming), when performed
0826T	Programming device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, review and report by a physician or other qualified health care professional, leadless pacemaker system in single-cardiac chamber
0857T	Opto-acoustic imaging, breast, unilateral, including axilla when performed, real-time with image documentation, augmentative analysis and report (List separately in addition to code for primary procedure)
0858T	Externally applied transcranial magnetic stimulation with concomitant measurement of evoked cortical potentials with automated report
0859T	Noncontact near-infrared spectroscopy (eg, for measurement of deoxyhemoglobin, oxyhemoglobin, and ratio of tissue oxygenation), other than for screening for peripheral arterial disease, image acquisition, interpretation, and report; each additional anatomic site (List separately in addition to code for primary procedure)
0860T	Noncontact near-infrared spectroscopy (eg, for measurement of deoxyhemoglobin, oxyhemoglobin, and ratio of tissue oxygenation), for screening for peripheral arterial disease, including provocative maneuvers, image acquisition, interpretation, and report, one or both lower extremities
0861T	Removal of pulse generator for wireless cardiac stimulator for left ventricular pacing; both components (battery and transmitter)

Code	Description (Table 7)
0862T	Relocation of pulse generator for wireless cardiac stimulator for left ventricular pacing, including device interrogation and programming; battery component only
0863T	Relocation of pulse generator for wireless cardiac stimulator for left ventricular pacing, including device interrogation and programming; transmitter component only
0864T	Low-intensity extracorporeal shock wave therapy involving corpus cavernosum, low energy
0865T	Quantitative magnetic resonance image (MRI) analysis of the brain with comparison to prior magnetic resonance (MR) study(ies), including lesion identification, characterization, and quantification, with brain volume(s) quantification and/or severity score, when performed, data preparation and transmission, interpretation and report, obtained without diagnostic MRI examination of the brain during the same session
0866T	Quantitative magnetic resonance image (MRI) analysis of the brain with comparison to prior magnetic resonance (MR) study(ies), including lesion detection, characterization, and quantification, with brain volume(s) quantification and/or severity score, when performed, data preparation and transmission, interpretation and report, obtained with diagnostic MRI examination of the brain (List separately in addition to code for primary procedure)
A4457	Enema tube, with or without adapter, any type, replacement only, each
A4468	Exsufflation belt, includes all supplies and accessories
A4540	Distal transcutaneous electrical nerve stimulator, stimulates peripheral nerves of the upper arm
A4541	Monthly supplies for use of device coded at E0733
A4542	Supplies and accessories for external upper limb tremor stimulator of the peripheral nerves of the wrist
A7023	Mechanical allergen particle barrier/inhalation filter, cream, nasal, topical
C1600	Catheter, transluminal intravascular lesion preparation device, bladed, sheathed (insertable)
C1601	Endoscope, single-use (i.e. disposable), pulmonary, imaging/illumination device (insertable)
C1602	Orthopedic/device/drug matrix/absorbable bone void filler, antimicrobial-eluting (implantable)
C1603	Retrieval device, insertable, laser (used to retrieve intravascular inferior vena cava filter)
C1604	Graft, transmural transvenous arterial bypass (implantable), with all delivery system components
C7556	Bronchoscopy, rigid or flexible, with bronchial alveolar lavage and transendoscopic endobronchial ultrasound (ebus) during bronchoscopic diagnostic or therapeutic intervention(s) for peripheral lesion(s), including fluoroscopic guidance, when performed
C7557	Catheter placement in coronary artery(s) 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 and intraprocedural coronary fractional flow reserve (ffr) with 3d functional mapping of color-coded ffr values for the coronary tree, derived from coronary angiogram data, for real-time review and interpretation of possible atherosclerotic stenosis(es) intervention
C7558	Catheter placement in coronary artery(s) 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 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

Code	Description (Table 7)
C7903	Group psychotherapy service for diagnosis, evaluation, or treatment of a mental health or substance use disorder provided remotely by hospital staff who are licensed to provide mental health services under applicable state law(s), when the patient is in their home, and there is no associated professional service
C9160	Injection, daxibotulinumtoxina-lanm, 1 unit
C9793	3D predictive model generation for pre-planning of a cardiac procedure, using data from cardiac computed tomographic angiography with report
E0492	Power source and control electronics unit for oral device/appliance for neuromuscular electrical stimulation of the tongue muscle, controlled by phone application
E0493	Oral device/appliance for neuromuscular electrical stimulation of the tongue muscle, used in conjunction with the power source and control electronics unit, controlled by phone application, 90-day supply
E0530	Electronic positional obstructive sleep apnea treatment, with sensor, includes all components and accessories, any type
E0678	Non-pneumatic sequential compression garment, full leg
E0679	Non-pneumatic sequential compression garment, half leg
E0680	Non-pneumatic compression controller with sequential calibrated gradient pressure
E0681	Non-pneumatic compression controller without calibrated gradient pressure
E0682	Non-pneumatic sequential compression garment, full arm
E0732	Cranial electrotherapy stimulation (ces) system, any type
E0733	Transcutaneous electrical nerve stimulator for electrical stimulation of the trigeminal nerve
E0734	External upper limb tremor stimulator of the peripheral nerves of the wrist
E0735	Non-invasive vagus nerve stimulator
E1301	Whirlpool tub, walk-in, portable
E2001	Suction pump, home model, portable or stationary, electric, any type, for use with external urine management system
E3000	Speech volume modulation system, any type, including all components and accessories
G0019	Community health integration (CHI) services by certified or trained auxiliary personnel under the direction of the physician/other Qualified Healthcare Professional (QHP), including a community health worker located in the patient's community; 60 minutes per calendar month, in the following activities: Holistic personal assessment; practitioner, home and community-based care coordination; health education; building patient self-advocacy skills; health care access/health system navigation; facilitating behavioral change necessary for meeting diagnosis and treatment goals; facilitating and providing social and emotion support.
G0022	Community health integration services, each additional 30 minutes per calendar month (List separately in addition to G0019)
G0023	Principal illness navigation services by certified or trained auxiliary personnel under the direction of a physician or other practitioner, including a patient navigator; 60 minutes per calendar month, in the following activities: Person-centered assessment; identifying or referring patient (and caregiver or family, if applicable) to appropriate supportive services; practitioner, home and community-based care coordination; health education; building patient self-advocacy skills; health care access/health system navigation.
G0024	Principal illness navigation services, additional 30 minutes per calendar month (list separately in addition to G0023)

Code	Description (Table 7)
G0137	Intensive outpatient services; weekly bundle, minimum of 9 services over a 7 contiguous day period, which can include individual and group therapy with physicians or psychologists (or other mental health professionals to the extent authorized under state law); occupational therapy requiring the skills of a qualified occupational therapist; services of social workers, trained psychiatric nurses, and other staff trained to work with psychiatric patients; individualized activity therapies that are not primarily recreational or diversionary; family counseling (the primary purpose of which is treatment of the individual's condition); patient training and education (to the extent that training and educational activities are closely and clearly related to individual's care and treatment); diagnostic services; and such other items and services (excluding meals and transportation) that are reasonable and necessary for the diagnosis or active treatment of the individual's condition, reasonably expected to improve or maintain the individual's condition and functional level and to prevent relapse or hospitalization, and furnished pursuant to such guidelines relating to frequency and duration of services in accordance with a physician certification and plan of treatment (provision of the services by a medicare-enrolled opioid treatment program); list separately in addition to code for primary procedure
G0140	"Principal illness navigation – Peer support by certified or trained auxiliary personnel under the direction of a physician or other practitioner, including a certified peer specialist; 60 minutes per calendar month, in the following activities: Person-centered assessment; identifying or referring patient (and caregiver or family,
G0146	if applicable) to appropriate supportive services; practitioner, home, and community-based care communication; health education; building patient self-advocacy skills; developing and proposing strategies to help meet person-centered treatment goals; facilitating and providing social and emotional support; leverage knowledge of the serious, high-risk condition and/or lived experience"
G9886	Principal illness navigation - Peer support, additional 30 minutes per calendar month (list separately in addition to G0140)
G9887	Behavioral counseling for diabetes prevention, in-person, group, 60 minutes
G9888	Behavioral counseling for diabetes prevention, distance learning, 60 minutes
L3161	Maintenance 5% wl from baseline weight in months 7-12
L5615	Foot, adductus positioning device, adjustable
M1211	Addition, endoskeletal knee-shin system, 4 bar linkage or multiaxial, fluid swing and stance phase control
M1212	Most recent hemoglobin a1c level > 9.0%
M1213	Hemoglobin a1c level is missing, or was not performed during the measurement period (12 months)
M1214	No history of spirometry results with confirmed airflow obstruction (fev1/fvc < 70%) and present spirometry is >= 70%
M1215	Spirometry results with confirmed airflow obstruction (fev1/fvc < 70%) documented and reviewed
M1216	Documentation of medical reason(s) for not documenting and reviewing spirometry results (e.g., patients with dementia or tracheostomy)
M1217	No spirometry results with confirmed airflow obstruction (fev1/fvc < 70%) documented and/or no spirometry performed with results documented during the encounter
M1218	Documentation of system reason(s) for not documenting and reviewing spirometry results (e.g., spirometry equipment not available at the time of the encounter)
M1219	Patient has copd symptoms (e.g., dyspnea, cough/sputum, wheezing)
M1220	Anaphylaxis due to the vaccine on or before the date of the encounter

Code	Description (Table 7)
MI221	Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist or artificial intelligence (ai) interpretation documented and reviewed; with evidence of retinopathy
MI222	Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist or artificial intelligence (ai) interpretation documented and reviewed; without evidence of retinopathy
MI223	Glaucoma plan of care not documented, reason not otherwise specified
MI224	Glaucoma plan of care documented
MI225	Intraocular pressure (iop) reduced by a value less than 20% from the pre-intervention level
MI226	Intraocular pressure (iop) reduced by a value of greater than or equal to 20% from the pre-intervention level
MI227	Iop measurement not documented, reason not otherwise specified
MI228	Evidence-based therapy was prescribed
MI229	Patient, who has a reactive hcv antibody test, and has a follow up hcv viral test that detected hcv viremia, has hcv treatment initiated within 3 months of the reactive hcv antibody test
MI230	Patient, who has a reactive hcv antibody test, and has a follow up hcv viral test that detected hcv viremia, is referred within 1 month of the reactive hcv antibody test to a clinician who treats hcv infection
MI231	Patient has a reactive hcv antibody test and does not have a follow up hcv viral test, or patient has a reactive hcv antibody test and has a follow up hcv viral test that detects hcv viremia and is not referred to a clinician who treats hcv infection within 1 month and does not have hcv treatment initiated within 3 months of the reactive hcv antibody test, reason not given
MI232	Patient receives hcv antibody test with nonreactive result
MI233	Patient receives hcv antibody test with reactive result
MI234	Patient does not receive hcv antibody test or patient does receive hcv antibody test but results not documented, reason not given
MI235	Patient has a reactive hcv antibody test, and has a follow up hcv viral test that does not detect hcv viremia
MI236	Documentation or patient report of hcv antibody test or hcv rna test which occurred prior to the performance period
MI237	Baseline mrs > 2
MI238	Patient reason for not screening for food insecurity, housing instability, transportation needs, utility difficulties, and interpersonal safety (e.g., patient declined or other patient reasons)
MI239	Documentation that administration of second recombinant zoster vaccine could not occur during the performance period due to the recommended 2-6 month interval between doses (i.e, first dose received after october 31)
MI240	Patient did not respond to the question of patient felt heard and understood by this provider and team
MI241	Patient did not respond to the question of patient felt this provider and team put my best interests first when making recommendations about my care
MI242	Patient did not respond to the question of patient felt this provider and team saw me as a person, not just someone with a medical problem
MI243	Patient did not respond to the question of patient felt this provider and team understood what is important to me in my life
MI244	Patient provided a response other than "completely true" for the question of patient felt heard and understood by this provider and team

Code	Description (Table 7)
MI245	Patient provided a response other than "completely true" for the question of patient felt this provider and team put my best interests first when making recommendations about my care
MI246	Patient provided a response other than "completely true" for the question of patient felt this provider and team saw me as a person, not just someone with a medical problem
MI247	Patient provided a response other than "completely true" for the question of patient felt this provider and team understood what is important to me in my life
MI248	Patient responded "completely true" for the question of patient felt this provider and team put my best interests first when making recommendations about my care
MI249	Patient responded "completely true" for the question of patient felt this provider and team saw me as a person, not just someone with a medical problem
MI250	Patient responded "completely true" for the question of patient felt this provider and team understood what is important to me in my life
MI251	Patient responded as "completely true" for the question of patient felt heard and understood by this provider and team
MI252	Patients for whom a proxy completed the entire hu survey on their behalf for any reason (no patient involvement)
MI253	Patients who did not complete at least one of the four patient experience hu survey items and return the hu survey within 60 days of the ambulatory palliative care visit
MI254	Patients who respond on the patient experience hu survey that they did not receive care by the listed ambulatory palliative care provider in the last 60 days (disavowal)
MI255	Patients who were deceased when the hu survey reached them
MI256	Patients who have another reason for visiting the clinic [not prenatal or postpartum care] and have a positive pregnancy test but have not established the clinic as an ob provider (e.g., plan to terminate the pregnancy or seek prenatal services elsewhere)
MI257	Prior history of known cvd
MI258	Cvd risk assessment not performed or incomplete (e.g., cvd risk assessment was not documented), reason not otherwise specified
MI259	Cvd risk assessment performed, have a documented calculated risk score
MI260	Patients listed on the kidney-pancreas transplant waitlist or who received a living donor transplant within the first year following initiation of dialysis
MI261	Patients who were not listed on the kidney-pancreas transplant waitlist or patients who did not receive a living donor transplant within the first year following initiation of dialysis
MI262	Patients that were on the kidney or kidney-pancreas waitlist prior to initiation of dialysis
MI263	Patients who had a transplant prior to initiation of dialysis
MI264	Patients in hospice on their initiation of dialysis date or during the month of evaluation
MI265	Patients age 75 or older on their initiation of dialysis date
MI266	Cms medical evidence form 2728 for dialysis patients: initial form completed
MI267	Patients admitted to a skilled nursing facility (snf)

Code	Description (Table 7)
MI268	Patients not on any kidney or kidney-pancreas transplant waitlist or is not in active status on any kidney or kidney-pancreas transplant waitlist as of the last day of each month during the measurement period
MI269	Patients on active status on any kidney or kidney-pancreas transplant waitlist as of the last day of each month during the measurement period
MI270	Receiving esrd mcp dialysis services by the provider on the last day of the reporting month
MI271	Patients not on any kidney or kidney-pancreas transplant waitlist as of the last day of each month during the measurement period
MI272	Patients with dementia at any time prior to or during the month
MI273	Patients on any kidney or kidney-pancreas transplant waitlist as of the last day of each month during the measurement period
MI274	Patients who were admitted to a skilled nursing facility (snf) within one year of dialysis initiation according to the cms-2728 form
MI275	Patients who were admitted to a skilled nursing facility (snf) during the month of evaluation were excluded from that month
MI276	Patients determined to be in hospice were excluded from month of evaluation and the remainder of reporting period
MI277	Bmi documented outside normal parameters, no follow-up plan documented, no reason given
MI278	Colorectal cancer screening results documented and reviewed
MI279	Elevated or hypertensive blood pressure reading documented, and the indicated follow-up is documented
MI280	Elevated or hypertensive blood pressure reading documented, indicated follow-up not documented, reason not given
MI281	Women who had a bilateral mastectomy or who have a history of a bilateral mastectomy or for whom there is evidence of a right and a left unilateral mastectomy
MI282	Blood pressure reading not documented, reason not given
MI283	Patient screened for tobacco use and identified as a tobacco non-user
MI284	Patient screened for tobacco use and identified as a tobacco user
MI285	Patients age 66 or older in institutional special needs plans (snp) or residing in long term care with pos code 32, 33, 34, 54, or 56 for more than 90 consecutive days during the measurement period
MI286	Screening, diagnostic, film, digital or digital breast tomosynthesis (3d) mammography results were not documented and reviewed, reason not otherwise specified
MI287	Bmi is documented as being outside of normal parameters, follow-up plan is not completed for documented medical reason
MI288	Bmi is documented below normal parameters and a follow-up plan is documented
MI289	Documented reason for not screening or recommending a follow-up for high blood pressure
MI290	Patient identified as tobacco user did not receive tobacco cessation intervention during the measurement period or in the six months prior to the measurement period (counseling and/or pharmacotherapy)
MI291	Patient not eligible due to active diagnosis of hypertension
MI292	Patients 66 years of age and older with at least one claim/encounter for frailty during the measurement period and a dispensed medication for dementia during the measurement period or the year prior to the measurement period
MI293	Patients 66 years of age and older with at least one claim/encounter for frailty during the measurement period and either one acute inpatient encounter with a diagnosis of advanced illness or two outpatient, observation, ed or nonacute inpatient encounters on different dates of service with an advanced illness diagnosis during the measurement period or the year prior to the measurement period

Code	Description (Table 7)
MI294	Bmi is documented above normal parameters and a follow-up plan is documented
MI295	Normal blood pressure reading documented, follow-up not required
MI296	Patients with a diagnosis or past history of total colectomy or colorectal cancer
MI297	Bmi is documented within normal parameters and no follow-up plan is required
MI298	Bmi not documented due to medical reason or patient refusal of height or weight measurement
MI299	Documentation of patient pregnancy anytime during the measurement period prior to and including the current encounter
MI300	Influenza immunization administered or previously received
MI301	Influenza immunization was not administered for reasons documented by clinician (e.g., patient allergy or other medical reasons, patient declined or other patient reasons, vaccine not available or other system reasons)
MI302	Patient identified as a tobacco user received tobacco cessation intervention during the measurement period or in the six months prior to the measurement period (counseling and/or pharmacotherapy)
MI303	Screening, diagnostic, film digital or digital breast tomosynthesis (3d) mammography results documented and reviewed
MI304	Hospice services provided to patient any time during the measurement period
MI305	Patient did not receive any pneumococcal conjugate or polysaccharide vaccine on or after their 19th birthday and before the end of the measurement period
MI306	Patient received any pneumococcal conjugate or polysaccharide vaccine on or after their 19th birthday and before the end of the measurement period
MI307	Patient had anaphylaxis due to the pneumococcal vaccine any time during or before the measurement period
MI308	Documentation stating the patient has received or is currently receiving palliative or hospice care
MI309	Influenza immunization was not administered, reason not given
MI310	Palliative care services provided to patient any time during the measurement period
MI311	Patient screened for tobacco use and received tobacco cessation intervention during the measurement period or in the six months prior to the measurement period (counseling, pharmacotherapy, or both), if identified as a tobacco user
MI312	Anaphylaxis due to the vaccine on or before the date of the encounter
MI313	Patient not screened for tobacco use
MI314	Tobacco screening not performed or tobacco cessation intervention not provided during the measurement period or in the six months prior to the measurement period
MI315	Bmi not documented and no reason is given
MI316	Colorectal cancer screening results were not documented and reviewed; reason not otherwise specified
MI317	Current tobacco non-user
MI318	Patients who are counseled on connection with a csp and explicitly opt out
MI319	Patients who did not have documented contact with a csp for at least one of their screened positive hrsns within 60 days after screening or documentation that there was no contact with a csp
MI320	Patients who had documented contact with a csp for at least one of their screened positive hrsns within 60 days after screening

Code	Description (Table 7)
MI321	Patients who screened positive for at least 1 of the 5 hrsns
MI322	Patients who were not seen within 7 weeks following the date of injection for follow up or who did not have a documented iop or no plan of care documented if the iop was >25 mm hg
MI323	Patients seen within 7 weeks following the date of injection and are screened for elevated intraocular pressure (iop) with tonometry with documented iop =<25 mm hg for injected eye
MI324	Patients seen within 7 weeks following the date of injection and are screened for elevated intraocular pressure (iop) with tonometry with documented iop >25 mm hg and a plan of care was documented
MI325	Patients who had an intravitreal or periocular corticosteroid injection (e.g., triamcinolone, preservative-free triamcinolone, dexamethasone, dexamethasone intravitreal implant, or fluocinolone intravitreal implant)
MI326	Patients who were not seen for reasons documented by clinician for patient or medical reasons (e.g., inadequate time for follow-up, patients who received a prior intravitreal or periocular steroid injection within the last six (6) months and had a subsequent iop evaluation with iop <25mm hg within seven (7) weeks of treatment)
MI327	Patients with a diagnosis of hypotony
MI328	Patients who were not appropriately evaluated during the initial exam and/or who were not re-evaluated within 8 weeks
MI329	Patients with a diagnosis of acute vitreous hemorrhage
MI330	Patients with a post-operative encounter of the eye with the acute pvd within 2 weeks before the initial encounter or 8 weeks after initial acute pvd encounter
MI331	Documentation of patient reason(s) for not having a follow up exam (e.g., inadequate time for follow up)
MI332	Patients who were appropriately evaluated during the initial exam and were re-evaluated no later than 8 weeks from initial exam
MI333	Patients who were not appropriately evaluated during the initial exam and/or who were not re-evaluated within 2 weeks
MI334	Acute vitreous hemorrhage
MI335	Patients with a post-operative encounter of the eye with the acute pvd within 2 weeks before the initial encounter or 2 weeks after initial acute pvd encounter
MI336	Documentation of patient reason(s) for not having a follow up exam (e.g., inadequate time for follow up)
MI337	Patients who were appropriately evaluated during the initial exam and were re-evaluated no later than 2 weeks
MI338	Acute PVD
MI339	Patients who had follow-up assessment 30 to 180 days after the index assessment who did not demonstrate positive improvement or maintenance of functioning scores during the performance period
MI340	Patients who had follow-up assessment 30 to 180 days after the index assessment who demonstrated positive improvement or maintenance of functioning scores during the performance period
MI341	Index assessment completed using the 12-item whodas 2.0 or sds during the denominator identification period
MI342	Patients who did not have a follow-up assessment or did not have an assessment within 30 to 180 days after the index assessment during the performance period
MI343	Patients who died during the performance period

Code	Description (Table 7)
MI344	Patients who are at pam level 4 at baseline or patients who are flagged with extreme straight line response sets on the pam
MI345	Patients who did not have a baseline pam score and/or a second score within 6 to 12 month of baseline pam score
MI346	Patients who had a baseline pam score and a second score within 6 to 12 month of baseline pam score
MI347	Patients who did not have a net increase in pam score of at least 6 points within a 6 to 12 month period
MI348	Patients who achieved a net increase in pam score of at least 3 points in a 6 to 12 month period (passing)
MI349	Patients who achieved a net increase in pam score of at least 6-points in a 6 to 12 month period (excellent)
MI350	Patients who did not have a net increase in pam score of at least 3 points within 6 to 12 month period
MI351	Patients who had a completed suicide safety plan initiated, reviewed or updated in collaboration with their clinician (concurrent or within 24 hours) of the index clinical encounter
MI352	Patients who had a suicide safety plan initiated, reviewed, or updated and reviewed and updated in collaboration with the patient and their clinician concurrent or within 24 hours of clinical encounter and within 120 days after initiation
MI353	Suicidal ideation and/or behavior symptoms based on the c-srs or equivalent assessment
MI354	Patients who did not have a completed suicide safety plan initiated, reviewed or updated in collaboration with their clinician (concurrent or within 24 hours) of the index clinical encounter
MI355	Patients who did not have a suicide safety plan initiated, reviewed, or updated or reviewed and updated in collaboration with the patient and their clinician concurrent or within 24 hours of clinical encounter and within 120 days after initiation
MI356	Suicide risk based on their clinician's evaluation or a clinician-rated tool
MI357	Patients who died during the measurement period
MI358	Patients who had a reduction in suicidal ideation and/or behavior upon follow-up assessment within 120 days of index assessment
MI359	Patients who did not have a reduction in suicidal ideation and/or behavior upon follow-up assessment within 120 days of index assessment
MI360	Index assessment during the denominator period when the suicidal ideation and/or behavior symptoms or increased suicide risk by clinician determination occurs and a non-zero c-srs score is obtained
MI361	Suicidal ideation and/or behavior symptoms based on the c-srs
MI362	Suicide risk based on their clinician's evaluation or a clinician-rated tool
MI363	Patients who died during the measurement period
MI364	Patients who did not have a follow-up assessment within 120 days of the index assessment
MI365	Calculated 10-year ascvd risk score of = 20 percent during the performance period
MI366	Patient encounter during the performance period with hospice and palliative care specialty code 17
MI367	Focusing on women's health mips value pathway
MI368	Quality care for the treatment of ear, nose, and throat disorders mips value pathway
MI369	Prevention and treatment of infectious disorders including hepatitis c and hiv mips value pathway
MI370	Quality care in mental health and substance use disorders mips value pathway
Q0516	Rehabilitative support for musculoskeletal care mips value pathway
Q0517	Pharmacy supplying fee for hiv pre-exposure prophylaxis fda approved prescription drug, per 30-days

SERVICES

Code	Description (Table 7)
Q0518	Pharmacy supplying fee for hiv pre-exposure prophylaxis fda approved prescription drug, per 60-days
Q4279	Pharmacy supplying fee for hiv pre-exposure prophylaxis fda approved prescription drug, per 90-days
Q4287	Vendaje ac, per square centimeter
Q4288	Dermabind dl, per square centimeter
Q4289	Dermabind ch, per square centimeter
Q4290	Revoshield + amniotic barrier, per square centimeter
Q4291	Membrane wrap-hydro, per square centimeter
Q4292	Lamellas xt, per square centimeter
Q4293	Lamellas, per square centimeter
Q4294	Acesso dl, per square centimeter
Q4295	Amnio quad-core, per square centimeter
Q4296	Amnio tri-core amniotic, per square centimeter
Q4297	Rebound matrix, per square centimeter
Q4298	Emerge matrix, per square centimeter”
Q4299	Amniocore pro, per square centimeter
Q4300	Amniocore pro+, per square centimeter
Q4301	Acesso tl, per square centimeter
Q4302	Activate matrix, per square centimeter
Q4303	Complete aca, per square centimeter
Q4304	Complete aa, per square centimeter

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Table 8 – Deleted Codes

Code	Description (Table 8)	Effective Date
74710	Measurement of diameters of pelvis in female	12/31/2023
0014M	Molecular pathology test for risk of serious liver disease within 5 years (Enhanced Liver Fibrosis (ELF) Test)	12/31/2023
0404T	Destruction of growths in uterus with ultrasound guidance using an endoscope	12/31/2023
0424T	Insertion or replacement of complete neurostimulator system for treatment of central sleep apnea, complete system	12/31/2023
0425T	Insertion or replacement of complete neurostimulator system for treatment of central sleep apnea, sensing leads only	12/31/2023
0426T	Insertion or replacement of stimulation lead of neurostimulator system for treatment of central sleep apnea	12/31/2023
0427T	Insertion or replacement of pulse generator of neurostimulator system for treatment of central sleep apnea	12/31/2023
0428T	Removal of pulse generator of neurostimulator system for treatment of central sleep apnea	12/31/2023
0429T	Removal of sensing lead of neurostimulator system for treatment of central sleep apnea	12/31/2023
0430T	Removal of stimulating lead of neurostimulator system for treatment of central sleep apnea	12/31/2023
0431T	Replacement of pulse generator of neurostimulator system for treatment of central sleep apnea	12/31/2023
0432T	Repositioning of stimulating lead of neurostimulator system for treatment of central sleep apnea	12/31/2023
0433T	Repositioning of sensing lead of neurostimulator system for treatment of central sleep apnea	12/31/2023
0434T	Interrogation evaluation of implanted neurostimulator pulse generator system for central sleep apnea	12/31/2023
0435T	Programming evaluation of implanted neurostimulator pulse generator system for central sleep apnea in one session	12/31/2023
0436T	Programming evaluation of implanted neurostimulator pulse generator system for central sleep apnea during sleep study	12/31/2023
0465T	Injection of medication into space above choroid membrane of eye	12/31/2023
0499T	Examination of bladder and urethra with mechanical dilation and drug delivery for narrowing of urethra using an endoscope	12/31/2023
0501T	Analysis of data from CT study of heart blood vessels to assess severity of heart artery disease, with interpretation and report	12/31/2023
0502T	Analysis of data from CT study of heart blood vessels to assess severity of heart artery disease, data preparation and transmission	12/31/2023
0503T	Analysis of data from CT study of heart blood vessels to assess severity of heart artery disease, analysis of fluid dynamics	12/31/2023
0504T	Analysis of data from CT study of heart blood vessels to assess severity of heart artery disease, anatomical data review	12/31/2023
0508T	Ultrasound measurement of bone density in shin bone	12/31/2023
0533T	Continuous recording of movement disorder symptoms for 8-10 days with set-up, patient training, configuration of monitor, upload of data , analysis and initial report configuration, download of review, interpretation and report	12/31/2023
0534T	Continuous recording of movement disorder symptoms for 8-10 days with set-up, patient training, configuration of monitor	12/31/2023
0535T	Continuous recording of movement disorder symptoms for 8-10 days with data upload, analysis and initial report configuration	12/31/2023
0536T	Continuous recording of movement disorder symptoms for 8-10 days with download of review, interpretation and report	12/31/2023
0641T	Noncontact near-infrared spectroscopy study of flap or wound, image acquisition only	12/31/2023

Code	Description (Table 8)	Effective Date
0642T	Noncontact near-infrared spectroscopy study of flap or wound, interpretation and report only	12/31/2023
0715T	Shockwave destruction of calcified plaque in coronary artery accessed through skin using catheter	12/31/2023
0768T	Transcutaneous magnetic stimulation of peripheral nerve by focused low-frequency electromagnetic pulse, subsequent treatment on first nerve	12/31/2023
0769T	Transcutaneous magnetic stimulation of peripheral nerve by focused low-frequency electromagnetic pulse, subsequent treatment on additional nerve	12/31/2023
0775T	Fusion of sacroiliac joint between spine and pelvis with bone graft, accessed through skin using imaging guidance	12/31/2023
0809T	Sacroiliac joint fusion, with image guidance, placement of transfixing device(s) and intra-articular implant(s), including tissue graft or synthetic device(s), through the skin	12/31/2023
C9152	Injection, aripiprazole, (abilify asimtufii), 1 mg	12/31/2023
C9153	Injection, amisulpride, 1 mg	12/31/2023
C9154	Injection, buprenorphine extended-release (brixadi), 1 mg	12/31/2023
C9155	Injection, epcoritamab-bysp, 0.16 mg	12/31/2023
C9156	Flotufolastat f 18, diagnostic, 1 millicurie	12/31/2023
C9157	Injection, tofersen, 1 mg	12/31/2023
C9158	Injection, risperidone, (uzedy), 1 mg	12/31/2023
C9770	Vitrectomy, mechanical, pars plana approach, with subretinal injection of pharmacologic/biologic agent	12/31/2023
C9771	Nasal/sinus endoscopy, cryoablation nasal tissue(s) and/or nerve(s), unilateral or bilateral	12/31/2023
C9788	Opto-acoustic imaging, breast (including axilla when performed), unilateral, with image documentation, analysis and report, obtained with ultrasound examination	12/31/2023
C9803	Hospital outpatient clinic visit specimen collection for severe acute respiratory syndrome coronavirus 2 (sars-cov-2) (coronavirus disease [covid-19]), any specimen source	12/31/2023
G0056	Optimizing chronic disease management mips value pathways	12/31/2023
G2066	Interrogation device evaluation(s), (remote) up to 30 days; implantable cardiovascular physiologic monitor system, implantable loop recorder system, or subcutaneous cardiac rhythm monitor system, remote data acquisition(s), receipt of transmissions and technician review, technical support and distribution of results	12/31/2023
G2108	Patient age 66 or older in institutional special needs plans (snp) or residing in long-term care with pos code 32, 33, 34, 54 or 56 for more than 90 consecutive days during the measurement period	12/31/2023
G2109	Patients 66 years of age and older with at least one claim/encounter for frailty during the measurement period and a dispensed medication for dementia during the measurement period or the year prior to the measurement period	12/31/2023
G2110	Patients 66 years of age and older with at least one claim/encounter for frailty during the measurement period and either one acute inpatient encounter with a diagnosis of advanced illness or two outpatient, observation, ed or nonacute inpatient encounters on different dates of service with an advanced illness diagnosis during the measurement period or the year prior to the measurement period	12/31/2023

Code	Description (Table 8)	Effective Date
G8506	Patient receiving angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) therapy	12/31/2023
G8818	Patient discharge to home no later than post-operative day #7	12/31/2023
G8825	Patient not discharged to home by post-operative day #7	12/31/2023
G8852	Positive airway pressure therapy was prescribed	12/31/2023
G8883	Biopsy results reviewed, communicated, tracked and documented	12/31/2023
G8884	Clinician documented reason that patient's biopsy results were not reviewed	12/31/2023
G8885	Biopsy results not reviewed, communicated, tracked or documented	12/31/2023
G8941	Elder maltreatment screen documented as positive, follow-up plan not documented, documentation the patient is not eligible for follow-up plan at the time of the encounter	12/31/2023
G8963	Cardiac stress imaging performed primarily for monitoring of asymptomatic patient who had pci within 2 years	12/31/2023
G8964	Cardiac stress imaging test performed primarily for any other reason than monitoring of asymptomatic patient who had pci within 2 years (e.g., symptomatic patient, patient greater than 2 years since pci, initial evaluation, etc)	12/31/2023
G9192	Documentation of system reason(s) for not prescribing beta-blocker therapy (eg, other reasons attributable to the health care system)	12/31/2023
G9229	Chlamydia, gonorrhea, and syphilis screening results not documented (patient refusal is the only allowed exception)	12/31/2023
G9451	Patient received one-time screening for hcv infection	12/31/2023
G9453	Documentation of patient reason(s) for not receiving one-time screening for hcv infection (e.g., patient declined, other patient reasons)	12/31/2023
G9454	One-time screening for hcv infection not received within 12-month reporting period and no documentation of prior screening for hcv infection, reason not given	12/31/2023
G9596	Pediatric patient had a head ct for trauma ordered by someone other than an emergency care provider or was ordered for a reason other than trauma	12/31/2023
G9612	Photodocumentation of two or more cecal landmarks to establish a complete examination	12/31/2023
G9613	Documentation of post-surgical anatomy (e.g., right hemicolectomy, ileocecal resection, etc.)	12/31/2023
G9614	Photodocumentation of less than two cecal landmarks (i.e., no cecal landmarks or only one cecal landmark) to establish a complete examination	12/31/2023
G9697	Documentation of patient reason(s) for not prescribing a long-acting inhaled bronchodilator	12/31/2023
G9715	Patients who use hospice services any time during the measurement period	12/31/2023
G9725	Patients who use hospice services any time during the measurement period	12/31/2023
G9852	Patients who died from cancer	12/31/2023
G9853	Patient admitted to the icu in the last 30 days of life	12/31/2023
G9854	Patient was not admitted to the icu in the last 30 days of life	12/31/2023
G9927	Documentation of system reason(s) for not prescribing an fda-approved anticoagulation due to patient being currently enrolled in a clinical trial related to af/atrial flutter treatment	12/31/2023

Code	Description (Table 8)	Effective Date
G9995	Patients who use palliative care services any time during the measurement period	12/31/2023
J9160	Injection, denileukin difitox, 300 micrograms	12/31/2023
K1001	Electronic positional obstructive sleep apnea treatment, with sensor, includes all components and accessories, any type	12/31/2023
K1002	Cranial electrotherapy stimulation (ces) system, any type	12/31/2023
K1003	Whirlpool tub, walk-in, portable	12/31/2023
K1005	Disposable collection and storage bag for breast milk, any size, any type, each	12/31/2023
K1006	Suction pump, home model, portable or stationary, electric, any type, for use with external urine management system	12/31/2023
K1009	Speech volume modulation system, any type, including all components and accessories	12/31/2023
K1013	Enema tube, with or without adapter, any type, replacement only, each	12/31/2023
K1014	Addition, endoskeletal knee-shin system, 4 bar linkage or multiaxial, fluid swing and stance phase control	12/31/2023
K1015	Foot, adductus positioning device, adjustable	12/31/2023
K1016	Transcutaneous electrical nerve stimulator for electrical stimulation of the trigeminal nerve	12/31/2023
K1017	Monthly supplies for use of device coded at k1016	12/31/2023
K1018	External upper limb tremor stimulator of the peripheral nerves of the wrist	12/31/2023
K1019	Supplies and accessories for external upper limb tremor stimulator of the peripheral nerves of the wrist	12/31/2023
K1020	Non-invasive vagus nerve stimulator	12/31/2023
K1021	Exsufflation belt, includes all supplies and accessories	12/31/2023
K1022	Addition to lower extremity prosthesis, endoskeletal, knee disarticulation, above knee, hip disarticulation, positional rotation unit, any type	12/31/2023
K1023	Distal transcutaneous electrical nerve stimulator, stimulates peripheral nerves of the upper arm	12/31/2023
K1024	Non-pneumatic compression controller with sequential calibrated gradient pressure	12/31/2023
K1025	Non-pneumatic sequential compression garment, full arm	12/31/2023
K1026	Mechanical allergen particle barrier/inhalation filter, cream, nasal, topical	12/31/2023
K1028	Power source and control electronics unit for oral device/appliance for neuromuscular electrical stimulation of the tongue muscle, controlled by phone application	12/31/2023
K1029	Oral device/appliance for neuromuscular electrical stimulation of the tongue muscle, used in conjunction with the power source and control electronics unit, controlled by phone application, 90-day supply	12/31/2023
K1031	Non-pneumatic compression controller without calibrated gradient pressure	12/31/2023
K1032	Non-pneumatic sequential compression garment, full leg	12/31/2023
K1033	Non-pneumatic sequential compression garment, half leg	12/31/2023
M1156	Patient received active chemotherapy any time during the measurement period	12/31/2023
M1157	Patient received bone marrow transplant any time during the measurement period	12/31/2023
M1158	Patient had history of immunocompromising conditions prior to or during the measurement period	12/31/2023

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