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Coverage & Billing Information for the 2023 Quarterly Code Update

BACKGROUND

Iowa Medicaid has reviewed the **Q2 2023** Billing Code Update to determine coverage and billing guidelines. The Iowa Medicaid coverage and billing information provided in this bulletin is effective **April 1, 2023**. 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 **April 1, 2023**.

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 **N/A**.

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 **April 1, 2023**.

Table 6

- CPT[®], CDT[®], & HCPCS codes that would be considered Outpatient Hospital on or after **April 1, 2023**.

Table 7

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

Table 8

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

- 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 **Q2 2023** code update may include modifications to descriptions for some existing HCPCS/CPT codes. These modifications are available for reference or download from the CMS website at www.cms.gov.

The **Q2** 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 **March 31, 2023**.

Special Billing Information in Table I shows if the code requires a Prior Authorization or if it suspends for claim review. If the column is blank, there is 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	Effective Date	Special Billing Information
A4341	Indwelling intraurethral drainage device with valve, patient inserted, replacement only, each	4/1/2023	
A4342	Accessories for patient inserted indwelling intraurethral drainage device with valve, replacement only, each	4/1/2023	
A4560	Neuromuscular electrical stimulator (NMES), disposable, replacement only	4/1/2023	
A6590	External urinary catheters; disposable, with wicking material, for use with suction pump, per month	4/1/2023	
A6591	External urinary catheter; non-disposable, for use with suction pump, per month	4/1/2023	
C9145	Injection, aprepitant, (Aponvie), 1 mg	4/1/2023	
C9146	Injection, mirvetuximab soravtansine-gynx, 1 mg	4/1/2023	PA Required
C9147	Injection, tremelimumab-actl, 1 mg	4/1/2023	PA Required
C9148	Injection, teclistamab-cqyv, 0.5 mg	4/1/2023	PA Required
C9149	Injection, teplizumab-mzwv, 5 mcg	4/1/2023	PA Required
E0677	Nonpneumatic sequential compression garment, trunk	4/1/2023	PA Required
E0711	Upper extremity medical tubing/lines enclosure or covering device, restricts elbow range of motion	4/1/2023	
J0208	Injection, sodium thiosulfate, 100 mg	4/1/2023	PA Required
J0218	Injection, olipudase alfa-rpcp, 1 mg	4/1/2023	PA Required
J0612	Injection, calcium gluconate (Fresenius Kabi), per 10 mg	4/1/2023	
J0613	Injection, calcium gluconate (WG Critical Care), per 10 mg	4/1/2023	
J1411	Injection, etranacogene dezaparvovec-drlb, per therapeutic dose	4/1/2023	PA Required
J1449	Injection, eflapegrastim-xnst, 0.1 mg	4/1/2023	PA Required
J1747	Injection, spesolimab-sbzo, 1 mg	4/1/2023	PA Required
J9196	Injection, gemcitabine HCl (Accord), not therapeutically equivalent to J9201, 200 mg	4/1/2023	
J9294	Injection, pemetrexed (Hospira), not therapeutically equivalent to J9305, 10 mg	4/1/2023	
J9296	Injection, pemetrexed (Accord), not therapeutically equivalent to J9305, 10 mg	4/1/2023	
J9297	Injection, pemetrexed (Sandoz), not therapeutically equivalent to J9305, 10 mg	4/1/2023	
K1035	Molecular diagnostic test reader, nonprescription self-administered and self-collected use, FDA approved, authorized, or cleared	4/1/2023	
L8678	Electrical stimulator supplies (external) for use with implantable neurostimulator, per month	4/1/2023	
Q5127	Injection, pegfilgrastim-fpgk (Stimufend), biosimilar, 0.5 mg	4/1/2023	PA Required
Q5128	Injection, ranibizumab-eqrn (Cimerli), biosimilar, 0.1 mg	4/1/2023	
Q5130	Injection, pegfilgrastim-pbbk (Fylnetra), biosimilar, 0.5 mg	4/1/2023	PA Required

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Table 2 – CDT®

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

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Table 3 – ICD-10-CM Codes

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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
JK	One month supply or less of drug or biological	4/1/2023
JL	Three month supply of drug or biological	4/1/2023
N1	Group 1 oxygen coverage criteria met	4/1/2023
N2	Group 2 oxygen coverage criteria met	4/1/2023
N3	Group 3 oxygen coverage criteria met	4/1/2023

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Table 6 – Outpatient Hospital

Code	Description (Table 6)	Effective Date
A4341	Indwelling intraurethral drainage device with valve, patient inserted, replacement only, each	4/1/2023
A4342	Accessories for patient inserted indwelling intraurethral drainage device with valve, replacement only, each	4/1/2023
A6590	External urinary catheters; disposable, with wicking material, for use with suction pump, per month	4/1/2023
A6591	External urinary catheter; non-disposable, for use with suction pump, per month	4/1/2023
C9145	Injection, aprepitant, (Aponvie), 1 mg	4/1/2023
C9146	Injection, mirvetuximab soravtansine-gynx, 1 mg	4/1/2023
C9147	Injection, tremelimumab-actl, 1 mg	4/1/2023
C9148	Injection, teclistamab-cqyv, 0.5 mg	4/1/2023
C9149	Injection, teplizumab-mzww, 5 mcg	4/1/2023
E0677	Nonpneumatic sequential compression garment, trunk	4/1/2023
E0711	Upper extremity medical tubing/lines enclosure or covering device, restricts elbow range of motion	4/1/2023
J0208	Injection, sodium thiosulfate, 100 mg	4/1/2023
J0218	Injection, olipudase alfa-rpcp, 1 mg	4/1/2023
J0612	Injection, calcium gluconate (Fresenius Kabi), per 10 mg	4/1/2023
J0613	Injection, calcium gluconate (WG Critical Care), per 10 mg	4/1/2023
J1411	Injection, etranacogene dezaparvovec-drlb, per therapeutic dose	4/1/2023
J1449	Injection, eflapegrastim-xnst, 0.1 mg	4/1/2023

Code	Description (Table 6)	Effective Date
J1747	Injection, spesolimab-sbzo, 1 mg	4/1/2023
J9196	Injection, gemcitabine HCl (Accord), not therapeutically equivalent to J9201, 200 mg	4/1/2023
J9294	Injection, pemetrexed (Hospira), not therapeutically equivalent to J9305, 10 mg	4/1/2023
J9296	Injection, pemetrexed (Accord), not therapeutically equivalent to J9305, 10 mg	4/1/2023
J9297	Injection, pemetrexed (Sandoz), not therapeutically equivalent to J9305, 10 mg	4/1/2023
K1035	Molecular diagnostic test reader, nonprescription self-administered and self-collected use, FDA approved, authorized, or cleared	4/1/2023
L8678	Electrical stimulator supplies (external) for use with implantable neurostimulator, per month	4/1/2023
Q5127	Injection, pegfilgrastim-fpgk (Stimufend), biosimilar, 0.5 mg	4/1/2023
Q5128	Injection, ranibizumab-eqrn (Cimerli), biosimilar, 0.1 mg	4/1/2023
Q5130	Injection, pegfilgrastim-pbbk (Fylnetra), biosimilar, 0.5 mg	4/1/2023

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Table 7 – Non-covered codes

Code	Description (Table 7)
0364U	Oncology (hematolymphoid neoplasm), genomic sequence analysis using multiplex (PCR) and next-generation sequencing with algorithm, quantification of dominant clonal sequence(s), reported as presence or absence of minimal residual disease (MRD) with quantitation of disease burden, when appropriate
0365U	Oncology (bladder), analysis of 10 protein biomarkers (AIAT, ANG, APOE, CA9, IL8, MMP9, MMP10, PAI1, SDC1 and VEGFA) by immunoassays, urine, algorithm reported as a probability of bladder cancer
0366U	Oncology (bladder), analysis of 10 protein biomarkers (AIAT, ANG, APOE, CA9, IL8, MMP9, MMP10, PAI1, SDC1 and VEGFA) by immunoassays, urine, algorithm reported as a probability of recurrent bladder cancer
0367U	Oncology (bladder), analysis of 10 protein biomarkers (AIAT, ANG, APOE, CA9, IL8, MMP9, MMP10, PAI1, SDC1 and VEGFA) by immunoassays, urine, diagnostic algorithm reported as a risk score for probability of rapid recurrence of recurrent or persistent cancer following transurethral resection
0368U	Oncology (colorectal cancer), evaluation for mutations of APC, BRAF, CTNNB1, KRAS, NRAS, PIK3CA, SMAD4, and TP53, and methylation markers (MYO1G, KCNQ5, C9ORF50, FLII, CLIP4, ZNF132 and TWIST1), multiplex quantitative polymerase chain reaction (qPCR), circulating cell-free DNA (cfDNA), plasma, report of risk score for advanced adenoma or colorectal cancer
0369U	Infectious agent detection by nucleic acid (DNA and RNA), gastrointestinal pathogens, 31 bacterial, viral, and parasitic organisms and identification of 21 associated antibiotic-resistance genes, multiplex amplified probe technique
0370U	Infectious agent detection by nucleic acid (DNA and RNA), surgical wound pathogens, 34 microorganisms and identification of 21 associated antibiotic-resistance genes, multiplex amplified probe technique, wound swab
0371U	Infectious agent detection by nucleic acid (DNA or RNA), genitourinary pathogen, semiquantitative identification, DNA from 16 bacterial organisms and 1 fungal organism, multiplex amplified probe technique via quantitative polymerase chain reaction (qPCR), urine
0372U	Infectious disease (genitourinary pathogens), antibiotic-resistance gene detection, multiplex amplified probe technique, urine, reported as an antimicrobial stewardship risk score
0373U	Infectious agent detection by nucleic acid (DNA and RNA), respiratory tract infection, 17 bacteria, 8 fungus, 13 virus, and 16 antibiotic-resistance genes, multiplex amplified probe technique, upper or lower respiratory specimen
0374U	Infectious agent detection by nucleic acid (DNA or RNA), genitourinary pathogens, identification of 21 bacterial and fungal organisms and identification of 21 associated antibiotic-resistance genes, multiplex amplified probe technique, urine

Code	Description (Table 7)
0375U	Oncology (ovarian), biochemical assays of 7 proteins (follicle stimulating hormone, human epididymis protein 4, apolipoprotein A-I, transferrin, beta-2 macroglobulin, prealbumin [i.e., transthyretin], and cancer antigen 125), algorithm reported as ovarian cancer risk score
0376U	Oncology (prostate cancer), image analysis of at least 128 histologic features and clinical factors, prognostic algorithm determining the risk of distant metastases, and prostate cancer-specific mortality, includes predictive algorithm to androgen deprivation-therapy response, if appropriate
0377U	Cardiovascular disease, quantification of advanced serum or plasma lipoprotein profile, by nuclear magnetic resonance (NMR) spectrometry with report of a lipoprotein profile (including 23 variables)
0378U	RFC1 (replication factor C subunit 1), repeat expansion variant analysis by traditional and repeat-primed PCR, blood, saliva, or buccal swab
0379U	Targeted genomic sequence analysis panel, solid organ neoplasm, DNA (523 genes) and RNA (55 genes) by next-generation sequencing, interrogation for sequence variants, gene copy number amplifications, gene rearrangements, microsatellite instability, and tumor mutational burden
0380U	Drug metabolism (adverse drug reactions and drug response), targeted sequence analysis, 20 gene variants and CYP2D6 deletion or duplication analysis with reported genotype and phenotype
0381U	Maple syrup urine disease monitoring by patient-collected blood card sample, quantitative measurement of allo-isoleucine, leucine, isoleucine, and valine, liquid chromatography with tandem mass spectrometry (LC-MS/MS)
0382U	Hyperphenylalaninemia monitoring by patient-collected blood card sample, quantitative measurement of phenylalanine and tyrosine, liquid chromatography with tandem mass spectrometry (LC-MS/MS)
0383U	Tyrosinemia type I monitoring by patient-collected blood card sample, quantitative measurement of tyrosine, phenylalanine, methionine, succinylacetone, nitisinone, liquid chromatography with tandem mass spectrometry (LC-MS/MS)
0384U	Nephrology (chronic kidney disease), carboxymethyllysine, methylglyoxal hydroimidazolone, and carboxyethyl lysine by liquid chromatography with tandem mass spectrometry (LC-MS/MS) and HbA1c and estimated glomerular filtration rate (GFR), with risk score reported for predictive progression to high-stage kidney disease
0385U	Nephrology (chronic kidney disease), apolipoprotein A4 (ApoA4), CD5 antigen-like (CD5L), and insulin-like growth factor binding protein 3 (IGFBP3) by enzyme-linked immunoassay (ELISA), plasma, algorithm combining results with HDL, estimated glomerular filtration rate (GFR) and clinical data reported as a risk score for developing diabetic kidney disease
0386U	Gastroenterology (Barrett's esophagus), PI6, RUNX3, HPPI, and FBNI methylation analysis, prognostic and predictive algorithm reported as a risk score for progression to high-grade dysplasia or esophageal cancer
A2019	Kerecis Omega3 MariGen Shield, per sq cm
A2020	AC5 Advanced Wound System (AC5)
A2021	NeoMatriX, per sq cm
A7049	Expiratory positive airway pressure intranasal resistance valve
E1905	Virtual reality cognitive behavioral therapy device (CBT), including preprogrammed therapy software
J2403	Chloroprocaine HCl ophthalmic, 3% gel, 1 mg
M0010	Enhancing oncology model (EOM) monthly enhanced oncology services (MEOS) payment for EOM enhanced services
Q4265	NeoStim TL, per sq cm
Q4266	NeoStim Membrane, per sq cm
Q4267	NeoStim DL, per sq cm
Q4268	SurGraft FT, per sq cm
Q4269	SurGraft XT, per sq cm
Q4270	Complete SL, per sq cm

Code	Description (Table 7)
Q4271	Complete FT, per sq cm
Q5129	Injection, bevacizumab-adcd (Vegzelma), biosimilar, 10 mg
S9563	Home injectable therapy, immunotherapy, including administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem

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Table 8 – Deleted Codes

Code	Description	Effective Date	Replacement Code (if applicable)
C1834	Pressure sensor system, includes all components (e.g., introducer, sensor), intramuscular (implantable), excludes mobile (wireless) software application	4/1/2023	N/A
G2023	Specimen collection for Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), any specimen source	4/1/2023	N/A
G2024	Specimen collection for severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) from an individual in a SNF or by a laboratory on behalf of a HHA, any specimen source	4/1/2023	N/A
J0610	Injection, calcium gluconate (Fresenius Kabi), per 10 ml	4/1/2023	J0612
J0611	Injection, calcium gluconate (WG Critical Care), per 10 ml	4/1/2023	J0613

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