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Coverage & Billing Information for the 2026 Quarterly Code Update

Background

Iowa Medicaid has reviewed the **Q3 2026** Billing Code Update to determine coverage and billing guidelines. The Iowa Medicaid coverage and billing information provided in this bulletin is effective **July 1, 2026**. 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 **Q3 2026** code update. Coverage and billing information for these codes applies to dates of service on or after **July 1, 2026**.

Table 2

- New Current Dental Terminology (CDT®) codes included in the Q2 2026 code update. Coverage and billing information for these codes applies to dates of service on or after **N/A**.

Table 3

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

Table 4

- CPT®, CDT®, & HCPCS codes that would be considered Outpatient Hospital on or after **July 1, 2026**.

Table 5

- Non-Covered Codes - CPT®, CDT® & HCPCS codes that have been thoroughly reviewed and Iowa Medicaid has decided not to cover effective **July 1, 2026**.

Table 6

- Deleted Codes - CPT®, CDT® & HCPCS codes that have been discontinued effective **June 30, 2026**

The **Q3 2026** 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 **Q3** 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 **July 1, 2026**.

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

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@hhs.iowa.gov

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>

Table 1 – CPT® & HCPCS Codes

Code	Description	Effective Date
C9310	Injection, Leucovorin calcium (avyxa), 1mg	7/1/2026
J0528	Injection, fosfomycin disodium, 20 mg	7/1/2026
J1289	Injection, narsoplimab-wuug, 1 mg	7/1/2026
J2361	Injection, depemokimab-ulaa, 1 mg	7/1/2026
J2374	Apraclonidine hydrochloride ophthalmic, 1 % solution, 0.1 mL	7/1/2026
J2789	Riboflavin 5'-phosphate, ophthalmic solution (epioxahd/epioxa), up to 2 mL	7/1/2026
J3405	Injection, onasemnogene abeparvovec-brve, per treatment	7/1/2026
J7176	Injection, human fibrinogen - chmt (fesilty), 1 mg	7/1/2026
J9053	Injection, belantamab mafodotin-blmf, 0.1 mg	7/1/2026
J9062	Injection, amivantamab 5 mg and hyaluronidase-lpuj	7/1/2026
J9232	Injection, docetaxel (hospira), not therapeutically equivalent to J9171, 1 mg	7/1/2026
M0231	Intravenous infusion, tocilizumab-bavi, for hospitalized adult patients with COVID-19 who are receiving systemic corticosteroids and require supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation only, includes infusion and post administration monitoring, first dose	7/1/2026
M0232	Intravenous infusion, tocilizumab-bavi, for hospitalized adult patients with COVID-19 who are receiving systemic corticosteroids and require supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation only, includes infusion and post administration monitoring, second dose	7/1/2026
Q0234	Injection, tocilizumab-bavi, for hospitalized adult patients with COVID-19 who are receiving systemic corticosteroids and require supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation only, 1 mg	7/1/2026
Q5164	Injection, ustekinumab-hmny (starjemza), biosimilar, 1 mg	7/1/2026
Q5165	Injection, denosumab-mobz (oziltus), biosimilar, 1 mg	7/1/2026
Q5166	Injection, denosumab-desu (osvyrti/jubereq), biosimilar, 1 mg	7/1/2026
Q5167	Injection, denosumab-qbde (enoby/xtrenbo), biosimilar, 1 mg	7/1/2026

Code	Description	Effective Date
Q5169	Injection, pegfilgrastim-unne (armlupeg), biosimilar, 0.5 mg	7/1/2026
Q5170	Injection, aflibercept-boav (eydenzelt), biosimilar, 1 mg	7/1/2026
Q5171	Injection, denosumab-mobz (boncresa), biosimilar, 1 mg	7/1/2026

Table 2 – CDT©

Code	Description	Effective Date
N/A		

Table 3 – Modifiers

Code	Description	Effective Date
N/A		

Table 4 – Outpatient Hospital

Code	Description	Effective Date
C9310	Injection, Leucovorin calcium (avyxa), 1mg	7/1/2026
J0528	Injection, fosfomycin disodium, 20 mg	7/1/2026
J1289	Injection, narsoplimab-wuug, 1 mg	7/1/2026
J2361	Injection, depemokimab-ulaa, 1 mg	7/1/2026
J2374	Apraclonidine hydrochloride ophthalmic, 1 % solution, 0.1 mL	7/1/2026
J2789	Riboflavin 5'-phosphate, ophthalmic solution (epioxahd/epioxa), up to 2 mL	7/1/2026
J3405	Injection, onasemnogene abeparvovec-brve, per treatment	7/1/2026
J7176	Injection, human fibrinogen - chmt (fesilty), 1 mg	7/1/2026
J9053	Injection, belantamab mafodotin-blmf, 0.1 mg	7/1/2026

Code	Description	Effective Date
J9062	Injection, amivantamab 5 mg and hyaluronidase-lpuj	7/1/2026
J9232	Injection, docetaxel (hospira), not therapeutically equivalent to J9171, 1 mg	7/1/2026
M0231	Intravenous infusion, tocilizumab-bavi, for hospitalized adult patients with COVID-19 who are receiving systemic corticosteroids and require supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation only, includes infusion and post administration monitoring, first dose	7/1/2026
M0232	Intravenous infusion, tocilizumab-bavi, for hospitalized adult patients with COVID-19 who are receiving systemic corticosteroids and require supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation only, includes infusion and post administration monitoring, second dose	7/1/2026
Q0234	Injection, tocilizumab-bavi, for hospitalized adult patients with COVID-19 who are receiving systemic corticosteroids and require supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation only, 1 mg	7/1/2026
Q5164	Injection, ustekinumab-hmny (starjemza), biosimilar, 1 mg	7/1/2026
Q5165	Injection, denosumab-mobz (oziltus), biosimilar, 1 mg	7/1/2026
Q5166	Injection, denosumab-desu (osvyrti/jubereq), biosimilar, 1 mg	7/1/2026
Q5167	Injection, denosumab-qbde (enoby/xtrenbo), biosimilar, 1 mg	7/1/2026
Q5169	Injection, pegfilgrastim-unne (armlupeg), biosimilar, 0.5 mg	7/1/2026
Q5170	Injection, aflibercept-boav (eydenzelt), biosimilar, 1 mg	7/1/2026
Q5171	Injection, denosumab-mobz (boncresa), biosimilar, 1 mg	7/1/2026

Table 5 - Noncovered Codes

Code	Description	Effective Date
90616	Influenza virus vaccine, trivalent (TIRV), mRNA, 37.5 mcg/0.38 mL dosage, for intramuscular use	7/1/2026
90639	Influenza virus vaccine, quadrivalent (QIRV), mRNA; 50 mcg/0.5 mL dosage, for intramuscular use	7/1/2026
0631U	Oncology (solid tumor), dna, sequence analysis of 15 genes including brca1 and brca2 for identification of clonal hematopoiesis, blood, reported as tumor-derived or nontumor-derived	7/1/2026
0632U	Red blood cell antigen (fetal rhd gene analysis), multiplex polymerase chain reaction (pcr) and next-generation sequencing (ngs) of circulating cell-free dna (cfdna), plasma from pregnant individuals known to be rhd negative, reported as detected or not detected	7/1/2026
0633U	Obstetrics (single-gene noninvasive prenatal test), cell-free dna (cfdna), next-generation sequencing (ngs) analysis of 1 or more targets (eg, cftr, smn1, hbb, hba1, hba2) to identify paternally inherited pathogenic variants and to determine fetal inheritance of maternal mutation, using maternal blood sample, algorithm reported as a fetal risk score	7/1/2026
0634U	Oncology (breast cancer), cell-free dna (cfdna), evaluation of 11 esr1 variants (e380q, s463p, l536r, y537c, y537n, y537s, d538g, v422del, l536h, l536p, y537d) using droplet digital pcr (ddpcr), plasma, reported as positive or negative	7/1/2026
0635U	Autoimmune (atopic dermatitis), mrna, next-generation sequencing (ngs), gene expression profiling of 487 genes, noninvasive skin-surface scraping, algorithm reported as likelihood of response to therapy	7/1/2026
0636U	Babesia (babesiosis), antibody detection of 20 recombinant protein groups, by immunoassay, igg	7/1/2026
0637U	Babesia (babesiosis), antibody detection of 20 recombinant protein groups, by immunoassay, igm	7/1/2026
0638U	Bartonella (bartonellosis), antibody detection of 32 recombinant protein groups, by immunoassay, igg	7/1/2026
0639U	Bartonella (bartonellosis), antibody detection of 32 recombinant protein groups, by immunoassay, igm	7/1/2026

Code	Description	Effective Date
0640U	Oncology (leptomeningeal metastases), tumor cell selection, identification, detection and enumeration based on differential cd318(cdc1p), susd2, cd340(erb2/her2), hgfr/cmet, folr1, egfr, n cadherin, muc1, epcam, and trop2 antibody biomarkers, cerebrospinal fluid, reported as detection and quantification of tumor cells	7/1/2026
0641U	Oncology (minimal residual disease [mrd]), tumor dna, next-generation sequencing (ngs), using formalin-fixed paraffin-embedded (ffpe) tissue and blood samples, initial (baseline) assessment	7/1/2026
0642U	Oncology (minimal residual disease [mrd]), tumor dna, next-generation sequencing (ngs), whole blood, comparison to previously performed analyses, reported as trend in circulating tumor dna (ctdna) level	7/1/2026
0643U	Oncology (genitourinary cancer), cell-free circulating tumor dna (ctdna), 200 genes, next-generation sequencing (ngs), interrogation for single-nucleotide variants (snvs), insertions/deletions, gene rearrangements, copy number alterations, and tumor mutation burden, using urine, identify and report mutations with clinical actionability	7/1/2026
0644U	Oncology (leukemia), minimal residual disease (mrd) detection for rearrangements, blood or bone marrow, personalized assay design and baseline quantification	7/1/2026
0645U	Oncology (leukemia), minimal residual disease (mrd) detection for rearrangements, based on digital pcr, blood or bone marrow, reported as not detected or detected with estimated abundance	7/1/2026
0646U	Oncology (molecular residual disease), whole genome sequence analysis, cell-free dna, whole blood, and formalin-fixed paraffin-embedded (ffpe) tumor tissue dna, baseline assessment	7/1/2026
0647U	Oncology (molecular residual disease), whole genome sequence analysis, cell-free dna (cfdna), whole blood, assessment utilizing patient-specific tumor information, reported as negative or percent circulating tumor dna (ctdna)	7/1/2026
0648U	Oncology (solid tumor), targeted genomic sequencing analysis, to detect deletions, insertions, and substitutions in 42 genes, copy number amplifications in 10 genes, and fusions and splice variants in 18 driver genes from dna and rna extracted from formalin-fixed paraffin-embedded (ffpe) tissue	7/1/2026

Code	Description	Effective Date
0649U	Neurology (alzheimer disease), dna, targeted next-generation sequencing (ngs) of ad-1 and ad-2 target regions, whole blood, prognostic algorithmic analysis, reported as categorization of cognitive status	7/1/2026
0650U	Drug metabolism (adverse drug reactions and drug response), genotyping of 9 genes (ie, cyp2d6, cyp2c19, g6pd, slco1b1, hla-b*58:01, nat2, cyp2c9, vkorc1, abcg2), reported as metabolizer status and transporter function	7/1/2026
0651U	Oncology (hereditary cancer), genomic dna, 55 hereditary cancer pre-dispositioned genes, next-generation sequencing (ngs) and digital multiplex ligation-dependent probe amplification for variants, small indels (<40 base pairs), using saliva, whole blood or nail clipping, interpretive clinical report with variant classification	7/1/2026
0652U	Drug metabolism (adverse drug reactions), dna analysis of 13 genes by targeted genotyping, using saliva or buccal swab, reported as diplotype and metabolizer status	7/1/2026
0653U	Nephrology (inherited kidney disorders), dna, analysis of approximately 700 genes associated with inherited kidney diseases by exome sequencing, using whole blood, saliva, or nail clipping, reported as an interpretive clinical report classifying pathogenic and likely pathogenic variants	7/1/2026
0654U	Inborn error of metabolism (primary mitochondrial disease), mitochondrial analysis of 1 enzyme complex by western blot analysis, using cultured skin fibroblasts, diagnostic qualitative result	7/1/2026
0655U	Inborn error of metabolism (primary mitochondrial disease), mitochondrial analysis of 1 enzyme complex by spectrophotometric kinetic assay, using cultured skin fibroblasts, diagnostic quantitative result	7/1/2026
0656U	Inborn error of metabolism (primary mitochondrial disease), mitochondrial analysis of 1 enzyme complex by radioactive activity assay, using cultured skin fibroblasts, diagnostic quantitative result	7/1/2026
0657U	Rare diseases (constitutional/heritable disorders), rapid whole genome sequence analysis of comparator nuclear and mitochondrial dna by next-generation sequencing (ngs), using blood or buccal sample, relevant variants reported with proband results	7/1/2026

Code	Description	Effective Date
0658U	Rare diseases (constitutional/heritable disorders), rapid whole genome sequence analysis of nuclear and mitochondrial dna by next-generation sequencing (ngs) for single-nucleotide variants (snvs), insertions/deletions, copy number variants, uniparental disomy, and repeat expansions, using blood or buccal sample, identification and categorization of genetic variants	7/1/2026
0659U	Rare diseases (constitutional/heritable disorders), ultrarapid whole genome sequence analysis of nuclear and mitochondrial dna by next-generation sequencing (ngs) for single-nucleotide variants (snvs), insertions/deletions, copy number variants, uniparental disomy, and repeat expansions, using blood or buccal sample, identification and categorization of genetic variants	7/1/2026
1026T	Transvaginal laser photobiomodulation therapy of pelvis, provided by a physician or other qualified health care professional	7/1/2026
1027T	Percutaneous insertion or replacement of neurostimulation catheter via left subclavian or left jugular vein into the superior vena cava, with verification of capture of phrenic nerves, mapping and programming, and delivery of transvenous phrenic neurostimulation therapy in ventilated patients, with repositioning when performed, including imaging guidance	7/1/2026
1028T	Mapping and programming of neurostimulation catheter with delivery of transvenous phrenic neurostimulation therapy in ventilated patients, with repositioning and verification of left phrenic nerve capture, per session	7/1/2026
1029T	Mapping and programming of neurostimulation catheter with delivery of transvenous phrenic neurostimulation therapy in ventilated patients, without catheter repositioning, per session	7/1/2026
1030T	Creation of digital 3d model from surface mesh files of patient-specific anatomy (eg, final anatomic representation [far]), cumulative time for up to 30 days; initial 30 minutes	7/1/2026
1031T	Creation of digital 3d model from surface mesh files of patient-specific anatomy (eg, final anatomic representation [far]), cumulative time for up to 30 days; each additional 30 minutes (list separately in addition to code for primary procedure)	7/1/2026

Code	Description	Effective Date
1032T	Creation of digital 3d model from surface mesh files of patient-specific anatomy (eg, final anatomic representation [far]) and digital simulation, cumulative time for up to 30 days; initial 60 minutes	7/1/2026
1033T	Creation of digital 3d model from surface mesh files of patient-specific anatomy (eg, final anatomic representation [far]) and digital simulation, cumulative time for up to 30 days; each additional 30 minutes (list separately in addition to code for primary procedure)	7/1/2026
1034T	Creation of digital 3d model from surface mesh files of patient-specific anatomy (eg, final anatomic representation [far]), digital simulation, and computational analyses (eg, computational fluid dynamics, finite element analysis), cumulative time for up to 30 days; initial 90 minutes	7/1/2026
1035T	Creation of digital 3d model from surface mesh files of patient-specific anatomy (eg, final anatomic representation [far]), digital simulation, and computational analyses (eg, computational fluid dynamics, finite element analysis), cumulative time for up to 30 days; each additional 30 minutes (list separately in addition to code for primary procedure)	7/1/2026
1036T	Noninvasive hemodynamic assessment with pulmonary pressures and ejection fraction when performed, including passive acquisition of acoustic and electrical signals, augmentative algorithmic analysis, and generation of a clinical report with review, interpretation, and clinical integration by a physician or other qualified health care professional	7/1/2026
1037T	Histotripsy (ie, non-thermal ablation via acoustic energy delivery) of malignant pancreatic tissue, including imaging guidance	7/1/2026
1038T	Autologous muscle cell therapy, injection(s) of muscle progenitor cells into the tongue, including esophagoscopy, when performed	7/1/2026
1039T	Connectomic analysis of previously performed multi-modal brain magnetic resonance imaging (mri) requiring physician or other qualified health care professional (qhp) analysis of software- and physician-generated structural and functional maps for integration of cortical grey matter correlation based on restingstate functional mri and mapping of white matter connectivity based on	7/1/2026

Code	Description	Effective Date
	diffusionweighted mri relative to brain regions, with physician or other qhp interpretation and report	
1040T	Bronchoscopy, flexible, with bronchial cryotherapy, 1 lung, including trachea, when performed	7/1/2026
1041T	Augmentative algorithmic analysis of encephalographic waveforms to identify the source and propagation of epileptiform activity, including artifact reduction with analysis of 3d localization of spike sources throughout the examination, 3d animations over time of high-amplitude event locations, high-frequency activity locations, and temporal relationships among locations, with interpretation and report by physician or other qualified health care professional, related to a previously performed electroencephalogram	7/1/2026
1042T	Implantation of absorbable urologic scaffold for prostatic urethra restoration of reconstructed bladder neck and urethral anastomosis (list separately in addition to code for primary procedure)	7/1/2026
1043T	Quantitative magnetic resonance, without imaging, for analysis of liver tissue, including assessment of 1 or more parameters (eg, proton density fat fraction [pdf], water diffusion, t1-water relaxation time), with automatically generated report	7/1/2026
1044T	Harvest of full-thickness skin for autologous heterogeneous skin-construct graft, including direct closure of donor site; first 5 sq cm or less	7/1/2026
1045T	Harvest of full-thickness skin for autologous heterogeneous skin-construct graft, including direct closure of donor site; each additional 5 sq cm, or part thereof (list separately in addition to code for primary procedure)	7/1/2026
1046T	Autologous heterogeneous skin-construct graft application, trunk, arms, legs; first 50 sq cm or less, or 0.5% of body area of infants and children	7/1/2026
1047T	Autologous heterogeneous skin-construct graft application, trunk, arms, legs; each additional 50 sq cm, or each additional 0.5% of body area of infants and children, or part thereof (list separately in addition to code for primary procedure)	7/1/2026
1048T	Autologous heterogeneous skin-construct graft application, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; first 50 sq cm or less, or 0.5% of body area of infants and children	7/1/2026

Code	Description	Effective Date
1049T	Autologous heterogeneous skin-construct graft application, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; each additional 50 sq cm, or each additional 0.5% of body area of infants and children, or part thereof (list separately in addition to code for primary procedure)	7/1/2026
1050T	Insertion, subcutaneous heart failure decompensation monitor, containing sensors that measure, at a minimum, heart rate, impedance, respiration rate, physical activity, heart sounds	7/1/2026
1051T	Removal of subcutaneous heart failure decompensation monitor	7/1/2026
1052T	Interrogation device evaluation(s), (in person or remote) up to 30 days, insertable subcutaneous heart failure decompensation monitor, analysis of physiologic parameters, including, at a minimum, heart rate, impedance, respiration rate, physical activity, heart sounds, with generation of a report, review and interpretation by a physician or other qualified health care professional	7/1/2026
1053T	Programming device evaluation (in person or remote) of subcutaneous heart failure decompensation monitor, with analysis of physiologic parameters, including, at a minimum, heart rate, impedance, respiration rate, physical activity, heart sounds, with generation of a report and review and interpretation by a physician or other qualified health care professional	7/1/2026
A9574	Injection, ferumoxytol, 1 mg	7/1/2026
C1609	Vertebral device, motion-preserving, with screw fixation	7/1/2026
C8014	Cystourethroscopy, with ureteroscopy and/or pyeloscopy, with lithotripsy, including use of a suction enabled ureteral access sheath, with irrigation (if performed)	7/1/2026
G0574	Management of new patient with dementia residing in an eligible residential care community, for use only in a medicare-approved cmmi model (services must be furnished within a patient's eligible residential care community, including assisted living facilities, board and care homes, or other qualifying residential settings where dementia care services are provided)	7/1/2026
G0575	Management of established patient with dementia residing in an eligible residential care community, for use only in a medicare-approved cmmi model (services must be furnished within a patient's eligible residential care community, including	7/1/2026

Code	Description	Effective Date
	assisted living facilities, board and care homes, or other qualifying residential settings where dementia care services are provided)	
G0577	Vasc embolization or occlusion proc w/use of a pressure-generatng cath, inclusive of all radiological S & I, intraprocedurl roadmappng,& imagng guidnce necssary to complte the intrvention; for tumors, orgn ischemia,or infarction	7/1/2026
G0669	Outcome-aligned payment (oap) for technology-enabled chronic care management of early cardio-kidney-metabolic (eckm) conditions (hypertension, or two or more of: dyslipidemia, obesity/overweight with central obesity marker, prediabetes); initial 12-month period; per month	7/1/2026
G0670	Outcome-aligned payment (oap) for technology-enabled chronic care management of early cardio-kidney-metabolic (eckm) conditions (hypertension, or two or more of: dyslipidemia, obesity/overweight with central obesity marker, prediabetes); follow-on 12-month period; per month	7/1/2026
G0671	Outcome-aligned payment (oap) for technology-enabled chronic care management of cardio-kidney-metabolic (ckm) conditions (one or more of: diabetes mellitus, chronic kidney disease stage 3a or 3b, atherosclerotic cardiovascular disease); initial 12-month period; per month	7/1/2026
G0672	Outcome-aligned payment (oap) for technology-enabled chronic care management of cardio-kidney-metabolic (ckm) conditions (one or more of: diabetes mellitus, chronic kidney disease stage 3a or 3b, atherosclerotic cardiovascular disease); follow-on 12-month period; per month	7/1/2026
G0673	Outcome-aligned payment (oap) for technology-enabled chronic care management of musculoskeletal (msk) conditions (chronic musculoskeletal pain); initial 12-month treatment period; per month	7/1/2026
G0674	Outcome-aligned payment (oap) for technology-enabled chronic care management of behavioral health (bh) conditions (one or more of: depression, anxiety); initial 12-month period; per month	7/1/2026
G0675	Outcome-aligned payment (oap) for technology-enabled chronic care management of behavioral health (bh) conditions (one or more of: depression, anxiety); follow-on 12-month period; per month	7/1/2026

Code	Description	Effective Date
G0676	Standard co-management service payment for documented review of clinical updates from access participant managing cardio-kidney-metabolic conditions (early cardio-kidney-metabolic [eckm] or cardio-kidney-metabolic [ckm] track); per review	7/1/2026
G0677	Standard co-management service payment for documented review of clinical updates from access participant managing musculoskeletal (msk) conditions; per review	7/1/2026
G0678	Standard co-management-management service payment for documented review of clinical updates from access participant managing behavioral health (bh) conditions (depression, anxiety); per review	7/1/2026
J1577	Injection, immune globulin (qivigy), 100 mg	7/1/2026
J3386	Injection, etuvetidigene autotemcel, per treatment	7/1/2026
Q5168	Injection, ranibizumab-leyk (nufymco), biosimilar, 0.1 mg	7/1/2026

Table 6 – Deleted Codes

Code	Description	Effective Date
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	6/30/2026
0577U	Oncology (ovarian), serum, analysis of 39 glycoproteins by liquid chromatography with tandem mass spectrometry (LC-MS/MS) in multiple reaction monitoring mode, reported as likelihood of malignancy	6/30/2026
C9309	Injection, onasemnogene abeparvovec-brve, per treatment	6/30/2026