

<b>CMS Manual System</b>	<b>Department of Health &amp; Human Services (DHHS)</b>
<b>Pub 100-04 Medicare Claims Processing</b>	<b>Centers for Medicare &amp; Medicaid Services (CMS)</b>
<b>Transmittal 12666</b>	<b>Date: May 31, 2024</b>
	<b>Change Request 13626</b>

**SUBJECT: July 2024 Integrated Outpatient Code Editor (I/OCE) Specifications Version 25.2**

**I. SUMMARY OF CHANGES:** The purpose of this Change Request (CR) is to provide the Integrated OCE instructions and specifications for the Integrated OCE that will be utilized under the Outpatient Prospective Payment System (OPPS) and non-OPPS for hospital outpatient departments, community mental health centers, all non-OPPS providers, and for limited services when provided in a home health agency not under the Home Health Prospective Payment System or to a hospice patient for the treatment of a non-terminal illness. The attached recurring update notification applies to publication 100-04, chapter 4, section 40.1.

**EFFECTIVE DATE: July 1, 2024**

*\*Unless otherwise specified, the effective date is the date of service.*

**IMPLEMENTATION DATE: July 1, 2024**

*Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revise information only, and not the entire table of contents.*

**II. CHANGES IN MANUAL INSTRUCTIONS:** (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED-Only One Per Row.

<b>R/N/D</b>	<b>CHAPTER / SECTION / SUBSECTION / TITLE</b>
N/A	N/A

**III. FUNDING:**

**For Medicare Administrative Contractors (MACs):**

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

**IV. ATTACHMENTS:**

**Recurring Update Notification**

# Attachment - Recurring Update Notification

Pub. 100-04	Transmittal: 12666	Date: May 31, 2024	Change Request: 13626
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**SUBJECT: July 2024 Integrated Outpatient Code Editor (I/OCE) Specifications Version 25.2**

**EFFECTIVE DATE: July 1, 2024**

*\*Unless otherwise specified, the effective date is the date of service.*

**IMPLEMENTATION DATE: July 1, 2024**

## I. GENERAL INFORMATION

**A. Background:** The purpose of this Change Request (CR) is to provide the Integrated OCE instructions and specifications for the Integrated OCE that will be utilized under the Outpatient Prospective Payment System (OPPS) and non-OPPS for hospital outpatient departments, community mental health centers, all non-OPPS providers, and for limited services when provided in a home health agency not under the Home Health Prospective Payment System or to a hospice patient for the treatment of a non-terminal illness. The attached recurring update notification applies to publication 100-04, chapter 4, section 40.1.

This instruction informs the A/B Medicare Administrative Contractors (MACs) Part A, the A/B MACs Part Home Health and Hospice (HHH) and the Fiscal Intermediary Shared System (FISS) that the I/OCE is being updated for July 1, 2024. The I/OCE routes all institutional outpatient claims (which includes Non-Outpatient Prospective Payment System [non-OPPS] hospital claims) through a single integrated OCE.

**B. Policy:** This notification provides the Integrated OCE instructions and specifications for the Integrated OCE that will be utilized under the OPPS and non-OPPS for hospital outpatient departments, community mental health centers, all non-OPPS providers, and for limited services when provided in a home health agency not under the Home Health Prospective Payment System or to a hospice patient for the treatment of a non-terminal illness. The I/OCE specifications will be posted to the CMS website and can be found at <https://www.cms.gov/medicare/coding/outpatientcodeedit>.

## II. BUSINESS REQUIREMENTS TABLE

*"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.*

Number	Requirement	Responsibility								
		A/B MAC			D M E M A C	Shared-System Maintainers				Other
		A	B	H H H		FI SS	M CS	V M S	C W F	
13626.1	The Shared System Maintainer shall install the Integrated OCE (I/OCE) into their systems.					X				
13626.2	Medicare contractors shall identify the I/OCE specifications on the CMS website at <a href="https://www.cms.gov/Medicare/Coding/OutpatientCodeEdit/OCEQtrReleaseSpecs">https://www.cms.gov/Medicare/Coding/OutpatientCodeEdit/OCEQtrReleaseSpecs</a> .	X		X		X				

### III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			DME MAC	CEDI
		A	B	HHH		
13626.3	Medicare Learning Network® (MLN): CMS will develop and release national provider education content and market it through the MLN Connects® newsletter shortly after we issue the CR. MACs shall link to relevant information on your website and follow IOM Pub. No. 100-09 Chapter 6, Section 50.2.4.1 for distributing the newsletter to providers. When you follow this manual section, you don't need to separately track and report MLN content releases. You may supplement with your local educational content after we release the newsletter.	X		X		

### IV. SUPPORTING INFORMATION

**Section A: Recommendations and supporting information associated with listed requirements: N/A**

*"Should" denotes a recommendation.*

X-Ref Requirement Number	Recommendations or other supporting information:

**Section B: All other recommendations and supporting information: N/A**

### V. CONTACTS

**Post-Implementation Contact(s):** Contact your Contracting Officer's Representative (COR).

### VI. FUNDING

**Section A: For Medicare Administrative Contractors (MACs):**

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

**ATTACHMENTS: 0**

**Final**

**Summary of Data Changes**

**IOCE v25.2.0 July 2024**

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**APC Changes****Added APCs**

The following APC(s) were added.

**Added APCs**

<b>APC</b>	<b>Eff Date</b>	<b>Description</b>	<b>Status Indicator</b>	<b>Payment</b>
00742	2024-01-01	Anacaulase-bcdb 8.8% gel 1 g	G	\$0.00
00744	2024-07-01	Inst tauro 1.35mg/hep 100u	G	\$0.00
00745	2024-07-01	Inj, toripalimab-tpzi, 1 mg	G	\$0.00
00746	2024-07-01	Inj, betibeglogene autotemce	G	\$0.00
00748	2024-07-01	Inj, lovotibeglogene autotem	G	\$0.00
00749	2024-07-01	Inj travoprost intra impl	G	\$0.00
00750	2024-07-01	Inj, nithiodote, 3mg / 125mg	K	\$0.00
00753	2024-07-01	Inj cefazolin (wg crit care)	K	\$0.00
00754	2024-07-01	Daptomycin (xellia) unrefrig	K	\$0.00
00755	2024-07-01	Oral methotrexate (jylamvo)	K	\$0.00
00756	2024-07-01	Oral methotrexate (xatmep)	K	\$0.00
00757	2024-07-01	Docetaxel (ingenus), 1 mg	K	\$0.00
00758	2024-07-01	Inj pemetrexed (bluepoint)	K	\$0.00
00760	2024-07-01	Tc-99m graphite crucible	G	\$0.00
02046	2024-07-01	Pmkr, dual, leadless	H	\$0.00
02047	2024-07-01	Adapter, us to endoscope	H	\$0.00

**Deleted APCs**

The following APC(s) were deleted.

**Deleted APCs**

<b>APC</b>	<b>Eff Date</b>	<b>Description</b>
01234	2024-07-01	Inj vasopressin (am reg) 1 u
01466	2024-07-01	Inj, vincristine sul lip 1mg
09168	2024-07-01	Inj, meropenem (b. braun)
09170	2024-07-01	Inj midazolam (wg crit care)
09211	2024-07-01	Inj, morphine (fresenius)
09409	2024-07-01	Gallium ga-68 psma-11 ucsf
09410	2024-07-01	Gallium ga-68 psma-11, ucla



**Modified APC Descriptions**

The following APC(s) had a description change.

**Modified APC Descriptions**

<b>APC</b>	<b>Eff Date</b>	<b>Description Current</b>	<b>Description Previous</b>
00727	2024-07-01	lnj, adzynma, 10 iu	Injection, apadamtase alfa
00728	2024-07-01	lnj, mirikizumab-mrkz, 1 mg	Injection, mirikizumab-mrkz
01468	2024-07-01	lnj, abilify maintena, 1 mg	lnj Aripiprazole Ext Rel 1mg

**Modified APC Status Indicators**

The following APC(s) had status indicator changes.

**Modified APC Status Indicators**

<b>APC</b>	<b>Eff Date</b>	<b>Description</b>	<b>Status Indicator Current</b>	<b>Status Indicator Previous</b>
09408	2024-07-01	Inj. naxitamab-gqgk, 1 mg	K	G
09411	2024-07-01	Inj. riabni, 10 mg	K	G
09412	2024-07-01	Injection, casimersen, 10 mg	K	G
09413	2024-07-01	lisocabtagene car pos t	K	G
09414	2024-07-01	Inj, cabote rilpivir 2mg 3mg	K	G
09415	2024-07-01	Injection, trilaciclib, 1mg	K	G
09416	2024-07-01	Inj, evinacumab-dgnb, 5 mg	K	G
09417	2024-07-01	Inj, melphalan flufenami 1mg	K	G
09418	2024-07-01	Inj. margetuximab-cmkb, 5 mg	K	G

# HCPCS Procedure Code Changes

## Added HCPCS Codes

The following HCPCS code(s) were added.

### Added HCPCS Codes

HCPCS	Eff Date	Description	Status Indicator	APC	Edit	Appr Date	Term Date
0450U	2024-07-01	Onc mm lc-ms/ms monoc p-prtn	Q4	00000			
0451U	2024-07-01	Onc mm lc-ms/ms pep ion quan	Q4	00000			
0452U	2024-07-01	Onc bldr mthyl penk lte-qmsp	A	00000			
0453U	2024-07-01	Onc clret ca cfdna qper asy	A	00000			
0454U	2024-07-01	U rare ds id opt genome mapg	A	00000			
0455U	2024-07-01	Nfct agt sti mult amp prb ur	Q4	00000			
0456U	2024-07-01	Ai ra ngs 19 genes anti-ccp	A	00000			
0457U	2024-07-01	Pfas 9 cmpnd lcms/ms pls/sr	Q4	00000			
0458U	2024-07-01	Onc brst ca s100 a8&a9 elisa	Q4	00000			
0459U	2024-07-01	Abeta42 & ttau eclia csf	Q4	00000			
0460U	2024-07-01	Onc whl bld/bucc rtper 24gen	A	00000			
0461U	2024-07-01	Onc rxgenom alys rtper 24gen	A	00000			
0462U	2024-07-01	Melatonin lvl tst slp std7/9	Q4	00000			
0463U	2024-07-01	Onc crvx mrna genxprsn 14bmk	A	00000			
0464U	2024-07-01	Onc clret scr qrtsa dna mrk	E1	00000	9		
0465U	2024-07-01	Onc urthl carc dna qmsp 2gen	A	00000			
0466U	2024-07-01	Crđ cad dna gwas 564856 snp	A	00000			
0467U	2024-07-01	Onc bldr dna ngs 60gen&aneup	A	00000			
0468U	2024-07-01	Hep nash mir34a5p a2m ykl40	Q4	00000			
0469U	2024-07-01	Rare ds whl gen seq ftl samp	A	00000			
0470U	2024-07-01	Onc orop detcj mrd 8 dna hpv	A	00000			
0471U	2024-07-01	Onc clrc ca 35 vm kras&nras	A	00000			
0472U	2024-07-01	Ca vi psp&sp1 antib sjogren	Q4	00000			
0473U	2024-07-01	Onc sld tum bld/slv 648 gene	A	00000			
0474U	2024-07-01	Hered pan ca gsap 88gene ngs	A	00000			
0475U	2024-07-01	Hered prst8 ca gsap 23 genes	A	00000			
0867T	2024-07-01	Tpla b9 prst8 hyprpls>=50ml	J1	05375			
0868T	2024-07-01	Hi-res gastric ep mapping	S	05723			
0869T	2024-07-01	Njx b1 sub mtrl hw fixj aug	J1	05113			
0870T	2024-07-01	Imp subq prtl ascets pmp sys	E2	00000	13		
0871T	2024-07-01	Rplcmt subq prtl ascites pmp	E2	00000	13		
0872T	2024-07-01	Rplcmt ndwllg bldr&prtl cath	E2	00000	13		
0873T	2024-07-01	Revj subq prtl asct pmp sys	E2	00000	13		
0874T	2024-07-01	Rmvl pertl ascites pmp sys	E2	00000	13		
0875T	2024-07-01	Prgm subq prtl asct pmp sys	E2	00000	13		
0876T	2024-07-01	Duplex scan hemo fstl lmtđ	E1	00000	9		
0877T	2024-07-01	Augmnt alys ch ct ild w/o ct	S	01508			
0878T	2024-07-01	Augmnt alys ch ct ild w/ct	S	01508			
0879T	2024-07-01	Augmnt alys ch ct ild prep	N	00000			
0880T	2024-07-01	Augmnt alys ch ct ild i&r	M	00000	72		
0881T	2024-07-01	Cryotherapy oral cavity	Q1	05735			
0882T	2024-07-01	Intraop ther estim pn ue 1st	N	00000			
0883T	2024-07-01	Intraop ther estim pn ue ea	N	00000			
0884T	2024-07-01	Esphgsc flx 1st tndsc dilat	J1	05303			
0885T	2024-07-01	Colsc flx 1st tndsc dilat	J1	05313			
0886T	2024-07-01	Sgmdsc flx 1st tndsc dilat	J1	05313			
0887T	2024-07-01	End-tidal ctrl inhaled anes	N	00000			
0888T	2024-07-01	Histotripsy mal renal tissue	S	01576			
0889T	2024-07-01	Prsnlz trgt dvl arhfcmrigtbs	S	01511			
0890T	2024-07-01	Arhfcmrigtbs 1st tx day	S	01522			
0891T	2024-07-01	Arhfcmrigtbs sbsq tx day	S	01522			
0892T	2024-07-01	Arhfcmrigtbs sbsq per tx day	S	01522			
0893T	2024-07-01	N-invas assmt bld oxygenation	Q1	05733			
0894T	2024-07-01	Cannulation liver allograft	C	00000			
0895T	2024-07-01	Connj lvr algrft prfu dev 1	C	00000			
0896T	2024-07-01	Connj lvr algrft prfu dev ea	C	00000			
0897T	2024-07-01	N-invas augmnt arrhyt alys	S	05724			
0898T	2024-07-01	N-invas prst8 cancer est map	S	05724			
0899T	2024-07-01	N-invas deter aqmbf aug cmr	E1	00000	9		
0900T	2024-07-01	N-invas est aqmbf asstv cmr	E1	00000	9		
90637	2024-07-01	Vacc qirv mrna 30mcg/.5ml im	E1	00000	9		
90638	2024-07-01	Vacc qirv mrna 60mcg/.5ml im	E1	00000	9		
A9506	2024-07-01	Tc-99m graphite crucible	G	00760			
C1605	2024-07-01	Pmkr, dual, leadless	H	02046	55		
C1606	2024-07-01	Adapter, us to endoscope	H	02047	55		
C9901	2024-07-01	Endo defect closure GI tract	J1	05362	55		
G0519	2024-07-01	New pt-cg dyad dem low cmplx	A	00000			
G0520	2024-07-01	New pt-cg dyad dem mod cmplx	A	00000			
G0521	2024-07-01	New pt-cg dyad dem hig cmplx	A	00000			

## Added HCPCS Codes

HCPCS	Eff Date	Description	Status Indicator	APC	Edit	Appr Date	Term Date
G0522	2024-07-01	Mgt nw pt dementia low cmplx	A	00000			
G0523	2024-07-01	Mgt nw pt dem mod-high cmplx	A	00000			
G0524	2024-07-01	Est pt-cg dyad dem low cmplx	A	00000			
G0525	2024-07-01	Est pt-cg dyad dem mod cmplx	A	00000			
G0526	2024-07-01	Est pt-cg dyad dem hig cmplx	A	00000			
G0527	2024-07-01	Mgt est pt dmentia low cmplx	A	00000			
G0528	2024-07-01	Mgt est pt dem mod-hi cmplx	A	00000			
G0529	2024-07-01	In home respite care, 4 hr u	A	00000			
G0530	2024-07-01	Adult daycare center, 8 hr u	A	00000			
G0531	2024-07-01	Fclty-based respite, 24 hr u	A	00000			
G9037	2024-07-01	Intrpro req fr rec phys/qhcp	A	00000			
G9038	2024-07-01	Co-management services	A	00000			
J0211	2024-07-01	Inj, nithiodote, 3mg / 125mg	K	00750			
J0687	2024-07-01	Inj cefazolin (wg crit care)	K	00753			
J0872	2024-07-01	Daptomycin (xellia) unrefrig	K	00754			
J0911	2024-07-01	Inst tauro 1.35mg/hep 100u	G	00744			
J1597	2024-07-01	Inj glycopyrrolate, glyrx-pf	N	00000			
J1598	2024-07-01	Inj glycopyrrolate fres kabi	N	00000			
J1748	2024-07-01	Inj, zymfentra, 10 mg	N	00000			
J2183	2024-07-01	Inj meropenem (wg crit care)	N	00000			
J2246	2024-07-01	Inj, micafungin (baxter)	E2	00000	13		
J2267	2024-07-01	Inj, mirikizumab-mrkz, 1 mg	G	00728			
J2373	2024-07-01	Inj, immphentiv, 20 mcg	N	00000			
J2468	2024-07-01	Inj, palonosetron (avyxa)	E2	00000	13		
J2470	2024-07-01	Inj pantoprazole sodium 40mg	N	00000			
J2471	2024-07-01	Inj pantoprazole(hikma) 40mg	N	00000			
J3247	2024-07-01	Inj secukinumab intrav 1mg	G	00725			
J3263	2024-07-01	Inj, toripalimab-tpzi, 1 mg	G	00745			
J3393	2024-07-01	Inj, betibeglogene autotemce	G	00746			
J3394	2024-07-01	Inj, lovotibeglogene autotem	G	00748			
J7171	2024-07-01	Inj, adzyna, 10 iu	G	00727			
J7355	2024-07-01	Inj travoprost intra impl	G	00749			
J8611	2024-07-01	Oral methotrexate (jylamvo)	K	00755			
J8612	2024-07-01	Oral methotrexate (xatmep)	K	00756			
J9361	2024-07-01	Inj, efbemalenograstim alfa-	E2	00000	13		
M0224	2024-01-01	Pemivibart infusion	S	01506	67	2024-03-22	
Q0224	2024-01-01	Inj, pemivibart, 4500 mg	L	00000	67	2024-03-22	
Q4311	2024-07-01	Acesso, per sq cm	N	00000			
Q4312	2024-07-01	Acesso ac, per sq cm	N	00000			
Q4313	2024-07-01	Dermabind fm, per sq cm	N	00000			
Q4314	2024-07-01	Reeva, per sq cm	N	00000			
Q4315	2024-07-01	Regenelink amniotic mem allo	N	00000			
Q4316	2024-07-01	Amchoplast, per sq cm	N	00000			
Q4317	2024-07-01	Vitograft, per sq cm	N	00000			
Q4318	2024-07-01	E-graft, per sq cm	N	00000			
Q4319	2024-07-01	Sanograft, per sq cm	N	00000			
Q4320	2024-07-01	Pellograft, per sq cm	N	00000			
Q4321	2024-07-01	Renograft, per sq cm	N	00000			
Q4322	2024-07-01	Caregraft, per sq cm	N	00000			
Q4323	2024-07-01	Alloply, per sq cm	N	00000			
Q4324	2024-07-01	Amniotx, per sq cm	N	00000			
Q4325	2024-07-01	Acapatch, per sq cm	N	00000			
Q4326	2024-07-01	Woundplus, per sq cm	N	00000			
Q4327	2024-07-01	Duoammion, per sq cm	N	00000			
Q4328	2024-07-01	Most, per sq cm	N	00000			
Q4329	2024-07-01	Singlay, per sq cm	N	00000			
Q4330	2024-07-01	Total, per sq cm	N	00000			
Q4331	2024-07-01	Axolotl graft, per sq cm	N	00000			
Q4332	2024-07-01	Axolotl dualgraft, per sq cm	N	00000			
Q4333	2024-07-01	Ardeograft, per sq cm	N	00000			
Q5137	2024-07-01	Inj, wezlana, sub cu, 1 mg	N	00000			
Q5138	2024-07-01	Inj, wezlana, iv, 1 mg	N	00000			

**Deleted HCPCS CPT Codes**

The following HCPCS code(s) were deleted.

**Deleted HCPCS CPT Codes**

HCPCS	Eff Date	Description
0204U	2024-07-01	Onc thyr mna xprsn alys 593
0353U	2024-07-01	Iadna chlmyd&gonorr amp prb
C9113	2024-07-01	Inj pantoprazole sodium, via
C9166	2024-07-01	Injection, secukinumab
C9167	2024-07-01	Injection, apadamtase alfa
C9168	2024-07-01	Injection, mirkizumab-mrkz
C9787	2024-07-01	Gastric ep mapg simult pt sx
C9790	2024-07-01	Kidney histotripsy w/image
J2780	2024-07-01	Ranitidine hydrochloride inj
J9371	2024-07-01	Inj, vincristine sul lip 1mg
Q4210	2024-07-01	Axolotl graf dualgraf sq cm
Q4277	2024-07-01	Woundplus e-grat, per sq cm
S0164	2024-07-01	Injection pantoprazole

**Modified HCPCS Code Descriptions**

The following HCPCS code(s) had a description change.

**Modified HCPCS Code Descriptions**

<b>HCPCS</b>	<b>Eff Date</b>	<b>Description Current</b>	<b>Description Previous</b>
0714T	2024-07-01	Tpla b9 prst8 hyprplsa<50ml	Tprnl lsr ablt b9 prst8 hypr
C9167	2024-04-01	Inj, adzynma, 10 iu	Injection, apadamtase alfa
J0401	2024-07-01	Inj, abilify maintena, 1 mg	Inj aripiprazole ext rel 1mg
J0873	2024-07-01	Inj daptomycin (xellia)	Inj, daptomycin (xellia)

**Modified HCPCS Code APC/Status Indicators/Edit Assignments**

The following HCPCS code(s) had an APC, Status Indicator, or Edit assignment change.

**Modified HCPCS Code APC/Status Indicators/Edit Assignments**

HCPCS	Eff Date	Description	APC Current	APC Previous	Status Indicator Current	Status Indicator Previous	Edits Current	Edits Previous
0621T	2024-01-01	Trabeculectomy interno laser	05492	00000	J1	E1		9
A9593	2024-07-01	Gallium ga-68 psma-11 ucsf	00000	09409	N	G		
A9594	2024-07-01	Gallium ga-68 psma-11, ucla	00000	09410	N	G		
J0741	2024-07-01	Inj, cabote rilpivir 2mg 3mg			K	G		
J1305	2024-07-01	Inj, evinacumab-dgnb, 5mg			K	G		
J1426	2024-07-01	Injection, casimersen, 10 mg			K	G		
J1448	2024-07-01	Injection, trilaciclib, 1mg			K	G		
J1574	2024-07-01	Inj, ganciclovir (exela)			N	E2		13
J2184	2024-07-01	Inj, meropenem (b. braun)	00000	09168	N	K		
J2251	2024-07-01	Inj midazolam (wg crit care)	00000	09170	N	K		
J2272	2024-07-01	Inj, morphine (fresenius)	00000	09211	N	K		
J2599	2024-07-01	Inj vasopressin (am reg) 1 u	00000	01234	N	K		
J7353	2024-01-01	Anacaulase-bcdb 8.8% gel 1 g	00742	00000	G	N		
J9172	2024-07-01	Docetaxel (ingenus), 1 mg	00757	00000	K	E2		13
J9247	2024-07-01	Inj, melphalan flufenami 1mg			K	G		
J9258	2024-07-01	Paclitaxel (teva)			E2	N	13	
J9322	2024-07-01	Inj pemetrexed (bluepoint)	00758	00000	K	E2		13
J9348	2024-07-01	Inj. naxitamab-gqgk, 1 mg			K	G		
J9353	2024-07-01	Inj. margetuximab-cmkb, 5 mg			K	G		
Q2054	2024-07-01	Lisocabtagene mara car pos t			K	G		
Q5123	2024-07-01	Inj. riabni, 10 mg			K	G		

**Mid Quarter Edits Additions**

The following HCPCS code(s) were added to Mid-Quarter edit 67, 68, 69, 83, or 110.

**Mid Quarter Edits Additions**

**Reason Key:** A=Added To List, N=New Code

<b>HCPCS</b>	<b>Eff Date</b>	<b>Description</b>	<b>Date</b>	<b>Edit</b>	<b>R*</b>
M0224	2024-01-01	Pemivibart infusion	2024-03-22	67	N
Q0224	2024-01-01	Inj, pemivibart, 4500 mg	2024-03-22	67	N



**Procedure And Low Age Restriction Additions**

The following HCPCS code(s) had a low age restriction that was added.

**Procedure And Low Age Restriction Additions**

Reason Key: A=Added To List, N=New Code

HCPCS	Eff Date	Description	Current Low Age	R*
M0224	2024-01-01	Pemivibart infusion	12	N
Q0224	2024-01-01	Inj, pemivibart, 4500 mg	12	N

**Conditional Bilateral Additions**

The following HCPCS were added to the Conditional Bilateral list.

**Conditional Bilateral Additions**

Reason Key: A=Added To List, N=New Code

HCPCS	Eff Date	Description	R*
0869T	2024-07-01	Njx b1 sub mtrl hw fixj aug	N
0876T	2024-07-01	Duplex scan hemo fstl lmtd	N
0882T	2024-07-01	Intraop ther estim pn ue 1st	N
0888T	2024-07-01	Histotripsy mal renal tissue	N

**Deductible Coinsurance Not Applicable Additions**

The following HCPCS were added to the Deductible Coinsurance Not Applicable list.

**Deductible Coinsurance Not Applicable Additions**

Reason Key: A=Added To List, N=New Code

HCPCS	Eff Date	Description	R*
M0224	2024-01-01	Pemivibart infusion	N

**Comprehensive APC HCPCS Additions**

The following HCPCS were assigned an SI = J1 and are applicable for Comprehensive APC logic.

**Comprehensive APC HCPCS Additions**

Reason Key: A=Added To List, N=New Code

HCPCS	Eff Date	Description	R*
0621T	2024-01-01	Trabeculectomy interno laser	A
0867T	2024-07-01	Tpla b9 prst8 hydrplsa>=50ml	N
0869T	2024-07-01	Njx b1 sub mtrl hw fixj aug	N
0884T	2024-07-01	Esphgsc flx 1st tndsc dilat	N
0885T	2024-07-01	Colsc flx 1st tndsc dilat	N
0886T	2024-07-01	Sgmdsc flx 1st tndsc dilat	N
C9901	2024-07-01	Endo defect closure GI tract	N

**CAPC Exclusion Additions**

The following HCPCS were added to the CAPC Exclusion list.

**CAPC Exclusion Additions**

**Reason Key: A=Added To List, N=New Code**

<b>HCPCS</b>	<b>Eff Date</b>	<b>Description</b>	<b>R*</b>
0877T	2024-07-01	Augmnt alys ch ct ild w/o ct	N
0878T	2024-07-01	Augmnt alys ch ct ild w/ct	N
0888T	2024-07-01	Histotripsy mal renal tissue	N
0889T	2024-07-01	Prsnlz trgt dvl arhfcmrigtbs	N
0890T	2024-07-01	Arhfcmrigtbs 1st tx day	N
0891T	2024-07-01	Arhfcmrigtbs sbsq tx day	N
0892T	2024-07-01	Arhfcmrigtbs sbsq per tx day	N
M0224	2024-01-01	Pemivibart infusion	N

### **CAPC Exclusion Removals**

The following HCPCS were removed from the CAPC Exclusion list.

### **CAPC Exclusion Removals**

**Reason Key: R=Removed From List, D=Code Terminated**

<b>HCPCS</b>	<b>Eff Date</b>	<b>Description</b>	<b>R*</b>
C9790	2024-07-01	Kidney histotripsy w/image	D

**FQHC Flu PPV Additions**

The following HCPCS were added to the FQHC Flu PPV list.

**FQHC Flu PPV Additions**

**Reason Key:** A=Added To List, N=New Code

<b>HCPCS</b>	<b>Eff Date</b>	<b>Description</b>	<b>R*</b>
90637	2024-07-01	Vacc qirv mrna 30mcg/.5ml im	N
90638	2024-07-01	Vacc qirv mrna 60mcg/.5ml im	N

**FQHC Non-Covered Additions**

The following HCPCS were added to the FQHC Non-Covered list.

**FQHC Non-Covered Additions**

Reason Key: A=Added To List, N=New Code

HCPCS	Eff Date	Description	R*
0450U	2024-07-01	Onc mm lc-ms/ms monoc p-prtn	N
0451U	2024-07-01	Onc mm lc-ms/ms pep ion quan	N
0452U	2024-07-01	Onc bldr mthyl penk lte-qmsp	N
0453U	2024-07-01	Onc clret ca cfdna qpcr asy	N
0454U	2024-07-01	U rare ds id opt genome mapg	N
0455U	2024-07-01	Nfct agt sti mult amp prb ur	N
0456U	2024-07-01	Ai ra ngs 19 genes anti-ccp	N
0457U	2024-07-01	Pfas 9 cmpnd lcms/ms pls/sr	N
0458U	2024-07-01	Onc brst ca s100 a8&a9 elisa	N
0459U	2024-07-01	Abeta42 & ttau eclia csf	N
0460U	2024-07-01	Onc whl bld/bucc rtPCR 24gen	N
0461U	2024-07-01	Onc rxgenom alys rtPCR 24gen	N
0462U	2024-07-01	Melatonin lvl tst slp std7/9	N
0463U	2024-07-01	Onc crvx mma genxprsn 14bmk	N
0464U	2024-07-01	Onc clret scr qrtsa dna mrk	N
0465U	2024-07-01	Onc urthl carc dna qmsp 2gen	N
0466U	2024-07-01	Crđ cad dna gwas 564856 snp	N
0467U	2024-07-01	Onc bldr dna ngs 60gen&aneup	N
0468U	2024-07-01	Hep nash mir34a5p a2m yk140	N
0469U	2024-07-01	Rare ds whl gen seq fl samp	N
0470U	2024-07-01	Onc orop detcj mrd 8 dna hpv	N
0471U	2024-07-01	Onc clrc ca 35 vrn kras&nras	N
0472U	2024-07-01	Ca vi psp&sp1 antb sjogren	N
0473U	2024-07-01	Onc sld tum bld/slv 648 gene	N
0474U	2024-07-01	Hered pan ca gsap 88gene ngs	N
0475U	2024-07-01	Hered prst8 ca gsap 23 genes	N



### **FQHC Non-Covered Removals**

The following HCPCS were removed from the FQHC Non-Covered list.

### **FQHC Non-Covered Removals**

**Reason Key: R=Removed From List, D=Code Terminated**

<b>HCPCS</b>	<b>Eff Date</b>	<b>Description</b>	<b>R*</b>
0204U	2024-07-01	Onc thyr mma xprsn alys 593	D
0353U	2024-07-01	ladna chlmyd&gonorr amp prb	D

**Pass-Through Radiopharm HCPCS Additions**

The following HCPCS were added to the Pass-Through Radiopharm HCPCS list.

**Pass-Through Radiopharm HCPCS Additions**

Reason Key: A=Added To List, N=New Code

HCPCS	Eff Date	Description	R*
A9506	2024-07-01	Tc-99m graphite crucible	N

**Pass-Through Radiopharm HCPCS Removals**

The following HCPCS were removed from the Pass-Through Radiopharm HCPCS list.

**Pass-Through Radiopharm HCPCS Removals**

**Reason Key: R=Removed From List, D=Code Terminated**

HCPCS	Eff Date	Description	R*
A9593	2024-07-01	Gallium ga-68 psma-11 ucsf	R
A9594	2024-07-01	Gallium ga-68 psma-11, ucla	R

**Skin Substitute High Cost Product Additions**

The following HCPCS were added to the Skin Substitute High Cost Product list.

**Skin Substitute High Cost Product Additions**

Reason Key: A=Added To List, N=New Code

HCPCS	Eff Date	Description	R*
Q4331	2024-07-01	Axolotl graft, per sq cm	N
Q4332	2024-07-01	Axolotl dualgraft, per sq cm	N

## **Skin Substitute High Cost Product Removals**

The following HCPCS were removed from the Skin Substitute High Cost Product list.

### **Skin Substitute High Cost Product Removals**

**Reason Key: R=Removed From List, D=Code Terminated**

<b>HCPCS</b>	<b>Eff Date</b>	<b>Description</b>	<b>R*</b>
Q4210	2024-07-01	Axolotl graf dualgraf sq cm	D

**Skin Substitute Low Cost Product Additions**

The following HCPCS were added to the Skin Substitute Low Cost Product list.

**Skin Substitute Low Cost Product Additions**

Reason Key: A=Added To List, N=New Code

HCPCS	Eff Date	Description	R*
Q4311	2024-07-01	Acesso, per sq cm	N
Q4312	2024-07-01	Acesso ac, per sq cm	N
Q4313	2024-07-01	Dermabind fm, per sq cm	N
Q4314	2024-07-01	Reeva, per sq cm	N
Q4315	2024-07-01	Regenlink amniotic mem allo	N
Q4316	2024-07-01	Amchoplast, per sq cm	N
Q4317	2024-07-01	Vitograft, per sq cm	N
Q4318	2024-07-01	E-graft, per sq cm	N
Q4319	2024-07-01	Sanograft, per sq cm	N
Q4320	2024-07-01	Pellograft, per sq cm	N
Q4321	2024-07-01	Renograft, per sq cm	N
Q4322	2024-07-01	Caregraft, per sq cm	N
Q4323	2024-07-01	Alloply, per sq cm	N
Q4324	2024-07-01	Amniotx, per sq cm	N
Q4325	2024-07-01	Acapatch, per sq cm	N
Q4326	2024-07-01	Woundplus, per sq cm	N
Q4327	2024-07-01	Duoamnion, per sq cm	N
Q4328	2024-07-01	Most, per sq cm	N
Q4329	2024-07-01	Singlay, per sq cm	N
Q4330	2024-07-01	Total, per sq cm	N
Q4333	2024-07-01	Ardeograft, per sq cm	N

### **Skin Substitute Low Cost Product Removals**

The following HCPCS were removed from the Skin Substitute Low Cost Product list.

### **Skin Substitute Low Cost Product Removals**

**Reason Key: R=Removed From List, D=Code Terminated**

<b>HCPCS</b>	<b>Eff Date</b>	<b>Description</b>	<b>R*</b>
Q4277	2024-07-01	Woundplus e-grat, per sq cm	D

**Device Procedure Additions**

The following HCPCS were added to the Device Procedure list.

**Device Procedure Additions**

**Reason Key: A=Added To List, N=New Code**

<b>HCPCS</b>	<b>Eff Date</b>	<b>Description</b>	<b>R*</b>
0869T	2024-07-01	Njx b1 sub mtrl hw fixj aug	N
0884T	2024-07-01	Esphgsc flx 1st tndsc dilat	N
0885T	2024-07-01	Colsc flx 1st tndsc dilat	N
0886T	2024-07-01	Sgmdsc flx 1st tndsc dilat	N



**Device Additions**

The following HCPCS were added to the Device list.

**Device Additions**

**Reason Key:** A=Added To List, N=New Code

<b>HCPCS</b>	<b>Eff Date</b>	<b>Description</b>	<b>R*</b>
C1605	2024-07-01	Pmkr, dual, leadless	N
C1606	2024-07-01	Adapter, us to endoscope	N

**Pass-Through Device HCPCS Additions**

The following HCPCS were added to the Pass-Through Device HCPCS list.

**Pass-Through Device HCPCS Additions**

Reason Key: A=Added To List, N=New Code

HCPCS	Eff Date	Description	R*
C1605	2024-07-01	Pmkr, dual, leadless	N
C1606	2024-07-01	Adapter, us to endoscope	N

### **Pass-Through Device HCPCS Removals**

The following HCPCS were removed from the Pass-Through Device HCPCS list.

### **Pass-Through Device HCPCS Removals**

**Reason Key: R=Removed From List, D=Code Terminated**

<b>HCPCS</b>	<b>Eff Date</b>	<b>Description</b>	<b>R*</b>
C1761	2024-07-01	Cath, trans intra litho/coro	R

**Pass-Through Device Offset Procedure Additions**

The following HCPCS were added to the list of pass-through device code pairs subject to a device offset.

**Pass-Through Device Offset Procedure Additions**

<b>Code1</b>	<b>Code2</b>	<b>Eff Date</b>	<b>Amount</b>
C1605	0795T	2024-07-01	\$0.00
C1605	0801T	2024-07-01	\$0.00
C1606	43237	2024-07-01	\$21.76
C1606	43232	2024-07-01	\$14.50
C1606	43259	2024-07-01	\$20.67
C1606	43238	2024-07-01	\$28.65
C1606	43231	2024-07-01	\$47.68
C1606	43240	2024-07-01	\$3,286.89
C1606	43242	2024-07-01	\$23.75
C1606	43253	2024-07-01	\$80.68

**Pass-Through Device Offset Procedure Removals**

The following HCPCS were removed from the list of pass-through device code pairs subject to a device offset.

**Pass-Through Device Offset Procedure Removals**

<b>Code1</b>	<b>Code2</b>	<b>Eff Date</b>	<b>Amount</b>
C1761	92928	2024-07-01	\$0.00
C1761	92933	2024-07-01	\$8,719.55
C1761	92943	2024-07-01	\$4,413.89
C1761	C9600	2024-07-01	\$0.00
C1761	C9602	2024-07-01	\$9,382.83
C1761	C9607	2024-07-01	\$8,524.07

**Pass-Through Device Offset Procedure Modifications**

The following HCPCS on the list of pass-through device code pairs subject to a device offset, had a modification to its offset amount.

**Pass-Through Device Offset Procedure Modifications**

<b>Code1</b>	<b>Code2</b>	<b>Eff Date</b>	<b>Current Amount</b>	<b>Previous Amount</b>
C1604	0505T	2024-01-01	\$0.00	\$4,947.41

**Terminated Device Procedure Additions**

The following HCPCS were added to the terminated device procedure list, that may be subject to device credit when the procedure is terminated early.

**Terminated Device Procedure Additions**

HCPCS	Eff Date	Amount
0869T	2024-07-01	\$956.05
0884T	2024-07-01	\$1,131.18
0885T	2024-07-01	\$829.32
0886T	2024-07-01	\$829.32

**Type One Addon Procedure Code Additions**

The following HCPCS were added to the Type One Addon Procedure code list (edit 106).

**Type One Addon Procedure Code Additions**

**Reason Key: A=Added To List, N=New Code**

<b>Addon</b>	<b>Primary</b>	<b>Eff Date</b>	<b>R*</b>
0207U	0206U	2024-07-01	A
0882T	64702	2024-07-01	N
0882T	64704	2024-07-01	N
0882T	64708	2024-07-01	N
0882T	64713	2024-07-01	N
0882T	64718	2024-07-01	N
0882T	64719	2024-07-01	N
0882T	64721	2024-07-01	N
0882T	64831	2024-07-01	N
0882T	64834	2024-07-01	N
0882T	64835	2024-07-01	N
0882T	64836	2024-07-01	N
0882T	64856	2024-07-01	N
0882T	64857	2024-07-01	N
0882T	64892	2024-07-01	N
0882T	64893	2024-07-01	N
0882T	64895	2024-07-01	N
0882T	64896	2024-07-01	N
0882T	64897	2024-07-01	N
0882T	64898	2024-07-01	N
0882T	64905	2024-07-01	N
0882T	64910	2024-07-01	N
0882T	64911	2024-07-01	N
0882T	64912	2024-07-01	N
0883T	0882T	2024-07-01	N
0887T	00100	2024-07-01	N
0887T	00102	2024-07-01	N
0887T	00103	2024-07-01	N
0887T	00104	2024-07-01	N
0887T	00120	2024-07-01	N
0887T	00124	2024-07-01	N
0887T	00126	2024-07-01	N
0887T	00140	2024-07-01	N
0887T	00142	2024-07-01	N
0887T	00144	2024-07-01	N
0887T	00145	2024-07-01	N
0887T	00147	2024-07-01	N
0887T	00148	2024-07-01	N
0887T	00160	2024-07-01	N
0887T	00162	2024-07-01	N
0887T	00164	2024-07-01	N
0887T	00170	2024-07-01	N
0887T	00172	2024-07-01	N
0887T	00174	2024-07-01	N
0887T	00176	2024-07-01	N
0887T	00190	2024-07-01	N
0887T	00192	2024-07-01	N
0887T	00210	2024-07-01	N
0887T	00211	2024-07-01	N
0887T	00212	2024-07-01	N
0887T	00214	2024-07-01	N
0887T	00215	2024-07-01	N
0887T	00216	2024-07-01	N
0887T	00218	2024-07-01	N
0887T	00220	2024-07-01	N
0887T	00222	2024-07-01	N
0887T	00300	2024-07-01	N
0887T	00320	2024-07-01	N
0887T	00322	2024-07-01	N
0887T	00326	2024-07-01	N
0887T	00350	2024-07-01	N
0887T	00352	2024-07-01	N
0887T	00400	2024-07-01	N
0887T	00402	2024-07-01	N
0887T	00404	2024-07-01	N
0887T	00406	2024-07-01	N
0887T	00410	2024-07-01	N
0887T	00450	2024-07-01	N
0887T	00454	2024-07-01	N
0887T	00470	2024-07-01	N
0887T	00472	2024-07-01	N



## Type One Addon Procedure Code Additions

Reason Key: A=Added To List, N=New Code

Addon	Primary	Eff Date	R*
0887T	00474	2024-07-01	N
0887T	00500	2024-07-01	N
0887T	00520	2024-07-01	N
0887T	00522	2024-07-01	N
0887T	00524	2024-07-01	N
0887T	00528	2024-07-01	N
0887T	00529	2024-07-01	N
0887T	00530	2024-07-01	N
0887T	00532	2024-07-01	N
0887T	00534	2024-07-01	N
0887T	00537	2024-07-01	N
0887T	00539	2024-07-01	N
0887T	00540	2024-07-01	N
0887T	00541	2024-07-01	N
0887T	00542	2024-07-01	N
0887T	00546	2024-07-01	N
0887T	00548	2024-07-01	N
0887T	00550	2024-07-01	N
0887T	00560	2024-07-01	N
0887T	00561	2024-07-01	N
0887T	00562	2024-07-01	N
0887T	00563	2024-07-01	N
0887T	00566	2024-07-01	N
0887T	00567	2024-07-01	N
0887T	00580	2024-07-01	N
0887T	00600	2024-07-01	N
0887T	00604	2024-07-01	N
0887T	00620	2024-07-01	N
0887T	00625	2024-07-01	N
0887T	00626	2024-07-01	N
0887T	00630	2024-07-01	N
0887T	00632	2024-07-01	N
0887T	00635	2024-07-01	N
0887T	00640	2024-07-01	N
0887T	00670	2024-07-01	N
0887T	00700	2024-07-01	N
0887T	00702	2024-07-01	N
0887T	00730	2024-07-01	N
0887T	00731	2024-07-01	N
0887T	00732	2024-07-01	N
0887T	00750	2024-07-01	N
0887T	00752	2024-07-01	N
0887T	00754	2024-07-01	N
0887T	00756	2024-07-01	N
0887T	00770	2024-07-01	N
0887T	00790	2024-07-01	N
0887T	00792	2024-07-01	N
0887T	00794	2024-07-01	N
0887T	00796	2024-07-01	N
0887T	00797	2024-07-01	N
0887T	00800	2024-07-01	N
0887T	00802	2024-07-01	N
0887T	00811	2024-07-01	N
0887T	00812	2024-07-01	N
0887T	00813	2024-07-01	N
0887T	00820	2024-07-01	N
0887T	00830	2024-07-01	N
0887T	00832	2024-07-01	N
0887T	00834	2024-07-01	N
0887T	00836	2024-07-01	N
0887T	00840	2024-07-01	N
0887T	00842	2024-07-01	N
0887T	00844	2024-07-01	N
0887T	00846	2024-07-01	N
0887T	00848	2024-07-01	N
0887T	00851	2024-07-01	N
0887T	00860	2024-07-01	N
0887T	00862	2024-07-01	N
0887T	00864	2024-07-01	N
0887T	00865	2024-07-01	N
0887T	00866	2024-07-01	N
0887T	00868	2024-07-01	N
0887T	00870	2024-07-01	N
0887T	00872	2024-07-01	N
0887T	00873	2024-07-01	N
0887T	00880	2024-07-01	N

## Type One Addon Procedure Code Additions

Reason Key: A=Added To List, N=New Code

Addon	Primary	Eff Date	R*
0887T	00882	2024-07-01	N
0887T	00902	2024-07-01	N
0887T	00904	2024-07-01	N
0887T	00906	2024-07-01	N
0887T	00908	2024-07-01	N
0887T	00910	2024-07-01	N
0887T	00912	2024-07-01	N
0887T	00914	2024-07-01	N
0887T	00916	2024-07-01	N
0887T	00918	2024-07-01	N
0887T	00920	2024-07-01	N
0887T	00921	2024-07-01	N
0887T	00922	2024-07-01	N
0887T	00924	2024-07-01	N
0887T	00926	2024-07-01	N
0887T	00928	2024-07-01	N
0887T	00930	2024-07-01	N
0887T	00932	2024-07-01	N
0887T	00932	2024-07-01	N
0887T	00934	2024-07-01	N
0887T	00936	2024-07-01	N
0887T	00938	2024-07-01	N
0887T	00940	2024-07-01	N
0887T	00942	2024-07-01	N
0887T	00944	2024-07-01	N
0887T	00948	2024-07-01	N
0887T	00950	2024-07-01	N
0887T	00952	2024-07-01	N
0887T	01112	2024-07-01	N
0887T	01120	2024-07-01	N
0887T	01130	2024-07-01	N
0887T	01140	2024-07-01	N
0887T	01150	2024-07-01	N
0887T	01160	2024-07-01	N
0887T	01170	2024-07-01	N
0887T	01173	2024-07-01	N
0887T	01200	2024-07-01	N
0887T	01202	2024-07-01	N
0887T	01210	2024-07-01	N
0887T	01212	2024-07-01	N
0887T	01214	2024-07-01	N
0887T	01215	2024-07-01	N
0887T	01220	2024-07-01	N
0887T	01230	2024-07-01	N
0887T	01232	2024-07-01	N
0887T	01234	2024-07-01	N
0887T	01250	2024-07-01	N
0887T	01260	2024-07-01	N
0887T	01270	2024-07-01	N
0887T	01272	2024-07-01	N
0887T	01274	2024-07-01	N
0887T	01320	2024-07-01	N
0887T	01340	2024-07-01	N
0887T	01360	2024-07-01	N
0887T	01380	2024-07-01	N
0887T	01382	2024-07-01	N
0887T	01390	2024-07-01	N
0887T	01392	2024-07-01	N
0887T	01400	2024-07-01	N
0887T	01402	2024-07-01	N
0887T	01404	2024-07-01	N
0887T	01420	2024-07-01	N
0887T	01430	2024-07-01	N
0887T	01432	2024-07-01	N
0887T	01440	2024-07-01	N
0887T	01442	2024-07-01	N
0887T	01444	2024-07-01	N
0887T	01462	2024-07-01	N
0887T	01464	2024-07-01	N
0887T	01470	2024-07-01	N
0887T	01472	2024-07-01	N
0887T	01474	2024-07-01	N
0887T	01480	2024-07-01	N
0887T	01482	2024-07-01	N
0887T	01484	2024-07-01	N
0887T	01486	2024-07-01	N
0887T	01490	2024-07-01	N

## Type One Addon Procedure Code Additions

Reason Key: A=Added To List, N=New Code

Addon	Primary	Eff Date	R*
0887T	01500	2024-07-01	N
0887T	01502	2024-07-01	N
0887T	01520	2024-07-01	N
0887T	01522	2024-07-01	N
0887T	01610	2024-07-01	N
0887T	01620	2024-07-01	N
0887T	01622	2024-07-01	N
0887T	01630	2024-07-01	N
0887T	01634	2024-07-01	N
0887T	01636	2024-07-01	N
0887T	01638	2024-07-01	N
0887T	01650	2024-07-01	N
0887T	01652	2024-07-01	N
0887T	01654	2024-07-01	N
0887T	01656	2024-07-01	N
0887T	01670	2024-07-01	N
0887T	01680	2024-07-01	N
0887T	01710	2024-07-01	N
0887T	01712	2024-07-01	N
0887T	01714	2024-07-01	N
0887T	01716	2024-07-01	N
0887T	01730	2024-07-01	N
0887T	01732	2024-07-01	N
0887T	01740	2024-07-01	N
0887T	01742	2024-07-01	N
0887T	01744	2024-07-01	N
0887T	01756	2024-07-01	N
0887T	01758	2024-07-01	N
0887T	01760	2024-07-01	N
0887T	01770	2024-07-01	N
0887T	01772	2024-07-01	N
0887T	01780	2024-07-01	N
0887T	01782	2024-07-01	N
0887T	01810	2024-07-01	N
0887T	01820	2024-07-01	N
0887T	01829	2024-07-01	N
0887T	01830	2024-07-01	N
0887T	01832	2024-07-01	N
0887T	01840	2024-07-01	N
0887T	01842	2024-07-01	N
0887T	01844	2024-07-01	N
0887T	01850	2024-07-01	N
0887T	01852	2024-07-01	N
0887T	01860	2024-07-01	N
0887T	01916	2024-07-01	N
0887T	01920	2024-07-01	N
0887T	01922	2024-07-01	N
0887T	01924	2024-07-01	N
0887T	01925	2024-07-01	N
0887T	01926	2024-07-01	N
0887T	01930	2024-07-01	N
0887T	01931	2024-07-01	N
0887T	01932	2024-07-01	N
0887T	01933	2024-07-01	N
0887T	01937	2024-07-01	N
0887T	01938	2024-07-01	N
0887T	01939	2024-07-01	N
0887T	01940	2024-07-01	N
0887T	01941	2024-07-01	N
0887T	01942	2024-07-01	N
0887T	01951	2024-07-01	N
0887T	01952	2024-07-01	N
0887T	01953	2024-07-01	N
0887T	01958	2024-07-01	N
0887T	01960	2024-07-01	N
0887T	01961	2024-07-01	N
0887T	01962	2024-07-01	N
0887T	01963	2024-07-01	N
0887T	01965	2024-07-01	N
0887T	01966	2024-07-01	N
0887T	01967	2024-07-01	N
0887T	01968	2024-07-01	N
0887T	01969	2024-07-01	N
0887T	01990	2024-07-01	N
0887T	01991	2024-07-01	N
0887T	01992	2024-07-01	N

**Type One Addon Procedure  
Code Additions****Reason Key: A=Added To List, N=New Code**

<b>Addon</b>	<b>Primary</b>	<b>Eff Date</b>	<b>R*</b>
0887T	01996	2024-07-01	N
0887T	01999	2024-07-01	N
0896T	0895T	2024-07-01	N
0899T	75563	2024-07-01	N
0900T	75563	2024-07-01	N
G0018	G0017	2024-07-01	A
G0022	G0019	2024-07-01	A
G0024	G0023	2024-07-01	A
G0146	G0140	2024-07-01	A



## 2 Summary of Quarterly Release Modifications

The modifications of the IOCE for the **July 1, 2024, v25.2** release is summarized in the table below. Readers should also read through the entire document and note the highlighted sections, which also indicate changes from the prior release of the software. Some IOCE modifications in the update may be retroactively added to prior releases. If so, the retroactive date appears in the 'Effective Date' column.

Item #	Type	Effective Date	Edits Affected	Modification
1.	Logic	7/1/2024	<a href="#">24</a>	Modify the software to maintain 28 prior quarters (7 years) of programs in each release. Remove older versions with each release. The earliest date/version included for this release is <b>10/1/2017, v18.3</b> of the IOCE.
2.	Logic	<b>10/1/2017</b>	<a href="#">57, 66, 89</a>	Logic Modification: Apply LIAF 1 bypass to applicable edits: <ul style="list-style-type: none"> <li>Edit 57 - E/M condition not met for observation and line item date for code G0378 is 1/1</li> <li>Edit 66 - Code requires manual pricing</li> <li>Edit 89 - FQHC claim lacks required qualifying visit code</li> </ul>
				<b>Documentation Changes:</b>
3.	Documentation	7/1/2024	<a href="#">122</a>	Updated the <a href="#">340B Drug Pricing Program</a> section to note that effective April 1, 2022 (v23.1), if modifier “JG” is reported with a pass-through drug and biological line (SI=G), the claim is returned to the provider with edit 122. The disposition was retroactively changed from an information only LIR to RTP in the January 2024 (v25.0) release.
4.	Documentation	7/1/2024	<a href="#">88</a>	Correction to the <a href="#">FQHC PPS – Intensive Outpatient Program (IOP) Processing for FQHCs</a> section to note that edit 88 is bypassed from FQHC IOP claims.
5.	Documentation	7/1/2024	<a href="#">81</a>	Flowchart Updates: <ul style="list-style-type: none"> <li><a href="#">Daily Mental Health Logic Flowchart (Prior to v24.0)</a> for correction to the note regarding edit 81 only applying to bill type 13x without condition code 41.</li> </ul>
6.	Documentation	7/1/2024	<a href="#">55</a>	Updates to the <a href="#">Edit Descriptions and Reason for Edit Generation Table</a> : <ul style="list-style-type: none"> <li>Include that LIAF 1 bypass is applicable to edit 55, 57, 66, 89</li> </ul>
7.	Documentation	7/1/2024		Updates to the <a href="#">IOCE Edits Applied by Hospital Bill Type Tables</a> : <ul style="list-style-type: none"> <li>Correction: Remove edit 38 from bill type 034x (OPPS).</li> <li>Correction: Remove edit 88 from bill type 077x w/CC 92 (OPPS).</li> <li>Correction: Remove edit 91 from bill type 071x w/CC 92 (OPPS).</li> </ul>
				<b>Content Changes:</b>
8.	Content	<b>3/22/2024</b>	<a href="#">67</a>	Add mid-quarter edit 67 (FDA approval) to the following HCPCS codes: <ul style="list-style-type: none"> <li>Q0224: 3/22/2024</li> <li>M0224: 3/22/2024</li> </ul>
9.	Content	<b>10/1/2017</b>	<a href="#">57</a>	Add the following edits to the Contractor Edit Bypass list: <ul style="list-style-type: none"> <li>Edit 57 - E/M condition not met for observation and line item date for code G0378 is 1/1</li> </ul>
10.	Content	7/1/2024		Corrections to the Edit Description reference table (DSC_EDIT): <ul style="list-style-type: none"> <li>Edit 135: Correction to description to state “Claim Day lacks required device code”.</li> <li>Edit 116: Correction to remove “inactive” from description.</li> </ul>
				<b>Data Content Changes:</b>
11.	Content	7/1/2024		Make all Diagnosis, HCPCS, APC, SI and edit changes as specified by CMS. Updates were made to the following tables and lists: <p><b>DATA_APC</b></p> <ul style="list-style-type: none"> <li>Added new APCs and modified descriptions as applicable</li> </ul> <p><b>DATA_CAPC</b></p> <ul style="list-style-type: none"> <li>Added new CAPCs</li> </ul> <p><b>DATA_EDIT_BYPASS</b></p> <ul style="list-style-type: none"> <li>Added applicable edit</li> </ul> <p><b>DATA_HCPCS</b></p> <ul style="list-style-type: none"> <li>Comprehensive APC exclusion list</li> <li>Conditional Bilateral list</li> <li>Deductible Coinsurance N/A list</li> <li>Device</li> <li>Device Procedure (<a href="#">edit 92</a>)</li> <li>FQHC Flu PPV list</li> <li>FQHC non-covered list (<a href="#">edit 91</a>)</li> <li>Mid Quarter Edit list (<a href="#">edit 67</a>)</li> <li>Non-Billable MAC list (<a href="#">edit 72</a>)</li> <li>Non-covered Service List (<a href="#">edit 9</a>)</li> <li>Non-reportable site of services list (<a href="#">edit 55</a>)</li> <li>Passthrough Radiopharm</li> <li>Procedure/Age Conflict (<a href="#">edit 7</a>)</li> <li>Separate payment not provided by Medicare (<a href="#">edit 13</a>)</li> <li>Skin substitutes list (<a href="#">edit 87</a>)</li> <li>Terminated Device Procedure list</li> </ul> <p><b>DSC_EDIT</b></p>

Item #	Type	Effective Date	Edits Affected	Modification
				<ul style="list-style-type: none"> <li>• Made description updates as applicable</li> </ul> <b>OFFSET_CODEPAIR</b> <ul style="list-style-type: none"> <li>• Pass-through Device Offset Code Pairs modifications</li> </ul> <b>OFFSET_HCPCS</b> <ul style="list-style-type: none"> <li>• Terminated Device Procedure Offset modifications</li> </ul>
12.	Content	7/1/2024	<a href="#">20, 40</a>	Implement NCCI v30.2 for July 2024.
13.	Content	7/1/2024	<a href="#">106</a>	Implement the Add-on code files for July 2024.
14.	Other	7/1/2024		Create 508-compliant versions of the Specifications, Summary of Data Changes and File Layout documents for publication on the CMS web site. Provide MF and PC IOCE software and supporting quarterly data file reports for publication on the CMS web site.