

<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 11735</b>	<b>Date: December 8, 2022</b>
	<b>Change Request 13024</b>

**SUBJECT: Healthcare Common Procedure Coding System (HCPCS) Codes Subject to and Excluded from Clinical Laboratory Improvement Amendments (CLIA) Edits**

**I. SUMMARY OF CHANGES:** The purpose of this Change Request (CR) is to inform contractors about the new HCPCS codes for 2023 that are subject to and excluded from CLIA edits. This Recurring Update Notification applies to Chapter 16, section 70.9.

**EFFECTIVE DATE: April 1, 2023**

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

**IMPLEMENTATION DATE: April 3, 2023**

*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/revised 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: 11735	Date: December 8, 2022	Change Request: 13024
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**SUBJECT: Healthcare Common Procedure Coding System (HCPCS) Codes Subject to and Excluded from Clinical Laboratory Improvement Amendments (CLIA) Edits**

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## I. GENERAL INFORMATION

**A. Background:** The Clinical Laboratory Improvement Amendments (CLIA) regulations require a facility to be appropriately certified for each test performed. To ensure that Medicare & Medicaid only pay for laboratory tests performed in certified facilities, each claim for a HCPCS code that is considered a CLIA laboratory test is currently edited at the CLIA certificate level.

The HCPCS codes that are considered a laboratory test under CLIA change each year. Contractors need to be informed about the new HCPCS codes that are both subject to CLIA edits and excluded from CLIA edits.

The following HCPCS codes were discontinued on March 31, 2022:

- 0097U - Test for detection of gastrointestinal disease-causing organism using amplified probe; and
- 0151U - Test for detection of respiratory disease-causing organisms in sputum or respiratory tract specimen, 33 target organismal and antibiotic resistance.

The following HCPCS codes were discontinued on September 30, 2022:

- 0012U - Gene analysis for germline disorder;
- 0013U - Gene analysis of solid organ tumor tissue;
- 0014U - DNA test for detecting gene abnormality associated with blood and lymphatic system cancer in blood or bone marrow; and
- 0056U - Whole genome sequencing in blood or bone marrow for acute myelogenous leukemia.

The HCPCS codes that follow are all subject to CLIA edits. These lists do not include new HCPCS codes for waived tests or provider-performed microscopy procedures. All these HCPCS codes require a facility to have either a CLIA certificate of registration (certificate type code 9), a CLIA certificate of compliance (certificate type code 1), or a CLIA certificate of accreditation (certificate type code 3). A facility without a valid, current, CLIA certificate, with a current CLIA certificate of waiver (certificate type code 2) or with a current CLIA certificate for provider-performed microscopy procedures (certificate type code 4) must not be permitted to be paid for these tests, unless a facility with a current CLIA certificate of waiver (certificate type code 2) or CLIA certificate for provider-performed microscopy procedures (certificate type code 4) bills the appropriate HCPCS service code with a QW modifier.

1. The HCPCS code listed below was added on February 21, 2022, and is subject to CLIA edits:

- 87913 - Genotype analysis of severe acute respiratory syndrome coronavirus 2 (COVID-19) by nucleic acid for identification of mutations in targeted regions.

1. The HCPCS codes listed below were added on April 1, 2022, and are subject to CLIA edits.

- 0306U - Initial baseline gene analysis for minimum residual disease in cancer, next-generation targeted sequencing analysis of cell-free DNA, to determine a patient specific panel for future comparisons;
- 0307U - Subsequent gene analysis for minimum residual disease in cancer, next-generation targeted sequencing analysis of cell-free DNA, to determine a patient specific panel for future comparisons;
- 0308U - Analysis of 3 proteins (high sensitivity [hs] troponin, adiponectin, and kidney injury molecule-1 [KIM-1]) in plasma specimen, algorithm reported as risk score for obstructive coronary artery disease;
- 0309U - Analysis of 4 proteins (NT-proBNP, osteopontin, tissue inhibitor of metalloproteinase-1 [TIMP-1], and kidney injury molecule-1 [KIM-1]) in plasma specimen, algorithm reported as risk score for major adverse heart event;
- 0310U - Analysis of 3 biomarkers (NT-proBNP, C-reactive protein, and T-uptake) for Kawasaki disease (KD) in plasma specimen, algorithm reported as risk score for KD;
- 0311U - Measurement of bacterial susceptibility to antibiotics, reported as phenotypic minimum inhibitory concentration (MIC) for each organism identified;
- 0312U - Analysis of 8 IgG autoantibodies and 2 cell-bound complement activation products associated with autoimmune disease, using enzyme-linked immunosorbent immunoassay (ELISA), flow cytometry and indirect immunofluorescence in serum specimen or plasma and whole blood specimen, individual components reported along with algorithmic systemic lupus erythematosus-likelihood assessment;
- 0313U - DNA and mRNA next-generation sequencing analysis of 74 genes and analysis of CEA (CEACAM5) gene expression in pancreatic cyst fluid specimen, algorithm reported as negative, low probability of cancer of pancreas or positive, high probability of cancer of pancreas;
- 0314U - mRNA gene expression profiling by real-time polymerase chain reaction (RT-PCR) of 35 genes (32 content and 3 housekeeping) associated with melanoma of skin in formalin-fixed paraffin-embedded (FFPE) tissue specimen, algorithm reported as benign, intermediate, or malignant;
- 0315U - mRNA gene expression profiling by real-time polymerase chain reaction (RT-PCR) of 40 genes (34 content and 6 housekeeping) associated with squamous cell carcinoma of skin in formalin-fixed paraffin-embedded (FFPE) tissue specimen, algorithm reported as benign, intermediate, or malignant;
- 0316U - Evaluation of outer surface protein A (OspA) of *Borrelia burgdorferi* (Lyme disease) in urine specimen;
- 0317U - Four-probe fluorescence in situ hybridization (FISH) (3q29, 3p22.1, 10q22.3, 10cen) assay of whole blood specimen, predictive algorithm-generated evaluation reported as decreased or increased risk for lung cancer;
- 0318U - Whole genome methylation analysis by microarray for 50 or more genes associated with congenital epigenetic disorders in blood specimen;
- 0319U - RNA gene expression profiling by select transcriptome sequencing in peripheral blood specimen taken before kidney transplant, algorithm reported as risk score for early acute rejection;
- 0320U - RNA gene expression profiling by select transcriptome sequencing in peripheral blood specimen taken after kidney transplant, algorithm reported as risk score for acute cellular rejection;
- 0321U - Detection test by nucleic acid (DNA or RNA) multiplex amplified probe technique for identification of 20 bacterial and fungal organisms associated with genital or urinary tract infection and identification of 16 associated antibiotic-resistance genes; and
- 0322U - Measurement of 14 acyl carnitines and microbiome-derived metabolites associated with autism spectrum disorders by liquid chromatography with tandem mass spectrometry (LC-MS/MS) in plasma specimen, results reported as negative or positive for risk of metabolic subtypes associated with autism spectrum disorders.

1. The HCPCS codes listed below were added on July 1, 2022, and are subject to CLIA edits.

- 0323U - DNA and mRNA next-generation sequencing analysis in cerebrospinal fluid specimen for detection of organisms causing disease in central nervous system;
- 0324U - Culture of spheroid ovarian cancer cells for evaluation of 4 drugs (carboplatin, doxorubicin, gemcitabine, paclitaxel), result reported as tumor chemotherapy response prediction for each drug;
- 0325U - Culture of spheroid ovarian cancer cells for evaluation of poly (ADP-ribose) polymerase (PARP) inhibitors (niraparib, olaparib, rucaparib, velparib), result reported as tumor chemotherapy response prediction for each drug;
- 0326U - Targeted genomic sequence analysis of 83 or more genes in cell free circulating DNA for detection of abnormalities associated with solid organ cancers;
- 0327U - DNA sequence analysis of selected regions for detection of abnormal fetal chromosome number (trisomy 13, 18, and 21) in maternal plasma specimen, algorithm reported as risk score for each trisomy, includes sex reporting, if performed;
- 0328U - Definitive drug testing for 120 or more drugs and metabolites in urine specimen;
- 0329U - Exome and transcriptome sequence analysis of DNA and RNA from tumor with DNA from normal blood or saliva for subtraction, report of clinically significant mutations with therapy associations;
- 0330U - Amplified nucleic acid probe for identification of 27 vaginal disease agents in vaginal swab specimen; and
- 0331U - Optical genome mapping of DNA from blood or bone marrow specimen, report of clinically significant alterations associated with blood or lymph system cancers.

1. The HCPCS code listed below was added on July 26, 2022, and is subject to CLIA edits.

- 87593 - Infectious agent detection by nucleic acid (dna or rna); orthopoxvirus (eg, monkeypox virus, cowpox virus, vaccinia virus), amplified probe technique, each.

1. The HCPCS codes listed below were added on October 1, 2022, and are subject to CLIA edits.

- 0332U - Genetic profiling of 8 epigenetic markers to evaluate probability of responding to immune checkpoint-inhibitor therapy for cancer;
- 0333U - Surveillance for liver cancer in high risk patients using algorithm;
- 0334U - Targeted genomic sequence analysis of 84 or more genes for detection of abnormalities associated with cancer of body organ;
- 0335U - Whole genome sequence analysis of fetal sample for detection of abnormalities associated with rare constitutional/heritable diseases;
- 0336U - Whole genome sequence analysis of comparator genome (parent) for detection of abnormalities associated with rare constitutional/heritable diseases;
- 0337U - Evaluation of plasma cells for detection of abnormalities associated with plasma cell disorders and myeloma;
- 0338U - Evaluation of circulating solid tumor cells in peripheral blood;
- 0339U - mRNA expression profiling of genes associated with high-grade prostate cancer;
- 0340U - DNA assays for detection of minimal residual disease in cancer;
- 0341U - Fetal DNA sequencing of products of conception for detection of abnormal chromosome number;
- 0342U - Multiplex immunoassay for markers of pancreatic cancer in serum;

- 0343U - Exosome-based analysis of 442 small noncoding RNAs in urine to evaluate risk of prostate cancer;
- 0344U - Evaluation of 28 lipid markers for risk of nonalcoholic fatty liver disease;
- 0345U - Genomic analysis panel of 15 genes for detection of abnormalities associated with mental health disorders;
- 0346U - Evaluation of Beta amyloid AB40 and AB42 ratio;
- 0347U - DNA analysis of 16 genes involved in drug metabolism or processing;
- 0348U - DNA analysis of 25 genes involved in drug metabolism or processing;
- 0349U - DNA analysis of 27 genes involved in drug metabolism or processing, report including gene-drug interactions;
- 0350U - DNA analysis of 27 genes involved in drug metabolism or processing, analysis and reported phenotypes;
- 0351U - Biochemical assays for markers of bacterial infection; and
- 0352U - Detection of bacteria causing vaginosis and vaginitis by multiplex amplified nucleic acid probe technique.
- 0353U - Detection of Chlamydia trachomatis and Neisseria gonorrhoeae by multiplex amplified DNA probe technique; and
- 0354U - Human papilloma virus (HPV) by quantitative polymerase chain reaction (qPCR).

1. The HCPCS codes listed below were added on January 1, 2023, and are subject to CLIA edits.

- 0355U – Apol1 (apolipoprotein 11) (eg, chronic kidney disease), risk variants (g1, g2)
- 0356U – Oncology (oropharyngeal), evaluation of 17 dna biomarkers using droplet digital pcr (ddpcr), cell-free dna, algorithm reported as a prognostic risk score for cancer recurrence
- 0357U – Oncology (melanoma), artificial intelligence (ai)-enabled quantitative mass spectrometry analysis of 142 unique pairs of glycopeptide and product fragments, plasma, prognostic, and predictive algorithm reported as likely, unlikely, or uncertain benefit from immunotherapy agents;
- 0358U - Neurology (mild cognitive impairment), analysis of b-amyloid 1-42 and 1-40, chemiluminescence enzyme immunoassay, cerebral spinal fluid, reported as positive, likely positive, or negative;
- 0359U - Oncology (prostate cancer), analysis of all prostate-specific antigen (psa) structural isoforms by phase separation and immunoassay, plasma, algorithm reports risk of cancer;
- 0360U - Oncology (lung), enzyme-linked immunosorbent assay (elisa) of 7 autoantibodies (p53, ny-eso-1, cage, gbu4-5, sox2, mage a4, and hud), plasma, algorithm reported as a categorical result for risk of malignancy;
- 0361U - Neurofilament light chain, digital immunoassay, plasma, quantitative;
- 0362U - Oncology (papillary thyroid cancer), gene-expression profiling via targeted hybrid capture-enrichment rna sequencing of 82 content genes and 10 housekeeping genes, formalin-fixed paraffin embedded (ffpe) tissue, algorithm reported as one of three molecular subtypes;
- 0363U - Oncology (urothelial), mrna, geneexpression profiling by real-time quantitative pcr of 5 genes (mdk, hoxa13, cdc2 [cdk1], igfbp5, and excr2), utilizing urine, algorithm incorporates age, sex, smoking history, and macrohematuria frequency, reported as a risk score for having urothelial carcinoma;
- 81418 - Genomic sequence analysis panel of at least 6 genes associated with drug metabolism;
- 81441 - Gene sequence analysis panel at least 30 genes associated with inherited bone marrow failure syndromes;
- 81449 - Targeted genomic sequence analysis panel of RNA of 5-50 genes associated with solid organ neoplasm;
- 81451 - Targeted genomic sequence analysis panel of RNA of 5-50 genes associated with blood and lymphatic system disorders;
- 81456 - Targeted genomic sequence analysis panel of RNA of 51 or greater genes associated with blood and lymphatic system disorders;
- 84433 - Evaluation of thiopurine S-methyltransferase (TPMT);

- 87467 - Measurement of Hepatitis B surface antigen (HBsAg);
- 87468 - Detection of Anaplasma phagocytophilum by amplified nucleic acid probe technique;
- 87469 - Detection of Babesia microtim by amplified nucleic acid probe technique;
- 87478 - Detection of Borrelia miyamotoi by amplified nucleic acid probe technique; and
- 87484 - Detection of Ehrlichia chaffeensis by amplified nucleic acid probe technique.

“\*\*\*NOTE\*\*\* This instruction is NOT intended to rescind/replace any previous instructions indicating that a laboratory with a valid CLIA certificate of waiver or CLIA certificate for provider-performed microscopy procedures be allowed to bill the above codes with a QW modifier.

This Recurring Update Notification applies to Chapter 16, Section 70.9.

**B. Policy:** The CLIA regulations require a facility to be appropriately certified for each test performed. To ensure that Medicare and Medicaid only pay for laboratory tests in a facility with a valid, current CLIA certificate, laboratory claims are currently edited at the CLIA certificate level.

## II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
13024.1	Contractors shall apply CLIA edits to the HCPCS codes mentioned above as subject to CLIA edits.		X						X	
13024.2	Contractors shall deny payment for a claim submitted with the HCPCS codes mentioned above as subject to CLIA edits to a provider without valid current CLIA certificate, with a CLIA certificate of waiver (certificate type code 2) (when billed <b><i>without</i></b> the ‘QW’ modifier), or with a CLIA certificate for provider-performed microscopy procedures (certificate type code 4) (when billed <b><i>without</i></b> the ‘QW’ modifier).		X							
13024.3	Contractors shall return a claim as unprocessable if a CLIA number is not submitted on claims by providers for the HCPCS mentioned above as subject to CLIA edits.		X							

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
13024.4	Contractors need not search their files to either retract payment for claims already paid or to retroactively pay claims. However, contractors shall adjust claims brought to their attention.		X							

### III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			DME MAC	CEDI
		A	B	HHH		
13024.5	Medicare Learning Network® (MLN): CMS will market provider education content through the MLN Connects® newsletter shortly after CMS releases the CR. MACs shall follow IOM Pub. No. 100-09 Chapter 6, Section 50.2.4.1 instructions for distributing the MLN Connects newsletter information to providers and link to relevant information on your website. You may supplement MLN content with your local information after we release the MLN Connects newsletter. Subscribe to the “MLN Connects” listserv to get MLN content notifications. You don’t need to separately track and report MLN content releases when you distribute MLN Connects newsletter content per the manual section referenced above.		X			

### IV. SUPPORTING INFORMATION

#### Section A: Recommendations and supporting information associated with listed requirements:

*"Should" denotes a recommendation.*

X-Ref Requirement Number	Recommendations or other supporting information:
	N/A

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

## **V. CONTACTS**

**Pre-Implementation Contact(s):** Kathleen Todd, kathleen.todd@cms.hhs.gov

**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**