

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 12077	Date: June 13, 2023
	Change Request 13210

Transmittal 12053 issued May 18, 2023, is being rescinded and replaced by Transmittal 12077, dated June 13, 2023, to update some language in the transmittal from April to July. We are also updating the language related to Covid-19 vaccine in policy section 1.B. We are removing HCPCS code J9321 from table 15 and are revising the descriptor for J9323 in table 15 and adding the language about these changes to Policy section 12.e. All other information remains the same.

SUBJECT: July 2023 Update of the Hospital Outpatient Prospective Payment System (OPPS)

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to describe changes to and billing instructions for various payment policies implemented in the July 2023 OPPS update. The July 2023 Integrated Outpatient Code Editor (I/OCE) will reflect the Healthcare Common Procedure Coding System (HCPCS), Ambulatory Payment Classification (APC), HCPCS Modifier, and Revenue Code additions, changes, and deletions identified in this CR. This RUN applies to Chapter 4, section 50.8 (Annual Updates to the OPPS Pricer for Calendar Year (CY) 2007 and Later).

EFFECTIVE DATE: July 1, 2023

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

IMPLEMENTATION DATE: July 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.

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
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: 12077	Date: June 13, 2023	Change Request: 13210
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SUBJECT: July 2023 Update of the Hospital Outpatient Prospective Payment System (OPPS)

EFFECTIVE DATE: July 1, 2023

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

IMPLEMENTATION DATE: July 3, 2023

I. GENERAL INFORMATION

A. Background: This Recurring Update Notification (RUN) provides instructions on coding changes and policy updates that are effective July 1, 2023 for the Hospital OPPS. The updates include coding and policy changes for new services, pass-through drug and devices, Covid-19 treatments, PLA codes and other items and services. The July 2023 revisions to I/OCE data files, instructions, and specifications are provided in the forthcoming July 2023 I/OCE CR.

B. Policy: 1. New Covid-19 CPT Vaccines and Administration Codes

American Medical Association (AMA) has been issuing unique Current Procedural Terminology (CPT) Category I codes which are developed based on collaboration with Centers for Medicare & Medicaid Services (CMS) and Centers for Disease Control and Prevention (CDC) for each coronavirus vaccine as well as administration codes unique to each such vaccine and dose. These codes are effective upon receiving Emergency Use Authorization (EUA) or approval from the Food and Drug Administration (FDA).

The CPT Editorial Panel has recently approved:

- A new CPT code (0174A) describing the service to administer the booster dose of the “Pfizer-BioNtech COVID-19 Vaccine, Bivalent” (91317) for individuals 6 months through 4 years.

The CMS identify an effective date of March 14, 2023 for CPT code 0174A, which describes the service to administer the Pfizer-BioNtech “COVID-19 Vaccine, Bivalent” as a booster dose for individuals 6 months through 4 years. This effective date corresponds with FDA EUA and/or approvals.

Effective March 14, 2023, CPT code 0174A is assigned to status indicator “S” (Procedure or Service, Not Discounted When Multiple, separate APC assignment) and APC 9398 (Covid-19 Vaccine Admin Dose 2 of 2, Single Dose Product or Additional Dose) in the July 2023 I/OCE update.

Beneficiary cost sharing shall not be applied to the new vaccine administration code.

CMS will provide future direction to the contractors as EUAs and/or approvals become available.

Table 1, attachment A, lists the long descriptors for the codes. These codes, along with their short descriptors, status indicators, and payment rates (where applicable) are also listed in the July 2023 OPPS Addendum B that is posted on the CMS website. For information on the OPPS status indicators, refer to OPPS Addendum D1 of the CY 2023 OPPS/Ambulatory Surgical Center (ASC) final rule for the latest

definitions.

2. CPT Proprietary Laboratory Analyses (PLA) Coding Changes Effective July 1, 2023

The AMA CPT Editorial Panel established 15 new PLA codes, specifically, CPT codes 0387U through 0401U, effective July 1, 2023.

Table 2, attachment A, lists the long descriptors and status indicators for the codes. The codes have been added to the July 2023 I/OCE with an effective date of July 1, 2023. In addition, the codes, along with their short descriptors and status indicators, are listed in the July 2023 OPSS Addendum B that is posted on the CMS website. For more information on OPSS status indicators, refer to OPSS Addendum D1 of the Calendar Year 2023 OPSS/ASC final rule for the latest definitions.

3. Advanced Diagnostic Laboratory Tests (ADLT) Under the Clinical Lab Fee Schedule (CLFS)

On March 23, 2023, CMS announced the approval of one laboratory test as an ADLT under paragraph (1) of the definition of an ADLT in § 414.502. We note that, under the OPSS, tests that receive ADLT status under section 1834A(d)(5)(A) of the Act are assigned to status indicator “A”. The laboratory test is listed in Table 3, attachment A.

Based on the ADLT designation, we revised the OPSS status indicator for HCPCS codes 0295U to “A” (Not paid under OPSS. Paid by MACs under a fee schedule or payment system other than OPSS) effective March 23, 2023. However, because the ADLT designation was made in March 2023, it was too late to include this change in the April 2023 I/OCE Release and the April 2023 OPSS update; therefore, we are including this change in the July 2023 I/OCE Release with an effective date of April 1, 2023.

For the latest list of ADLT approved tests under the CLFS, refer to this CMS website:

<https://www.cms.gov/files/document/advanced-diagnostic-laboratory-tests-under-medicare-clfs.pdf>. For more information on the OPSS status indicator “A”, refer to OPSS Addendum D1 of the CY 2023 OPSS/ASC final rule for the latest definitions.

4. New CPT Category III Codes Effective July 1, 2023

The AMA releases CPT Category III codes twice per year: in January, for implementation beginning the following July, and in July, for implementation beginning the following January.

For the July 2023 update, CMS is implementing 20 new CPT Category III codes that the AMA released in January 2023 for implementation on July 1, 2023. The status indicators and APC assignments for these codes are shown in Table 4, attachment A. CPT codes 0791T through 0810T have been added to the July 2023 I/OCE with an effective date of July 1, 2023. These codes, along with their short descriptors, Status Indicators (SI), and payment rates (where applicable) are also listed in the July 2023 OPSS Addendum B that is posted on the CMS website. For more information on the OPSS SI, refer to OPSS Addendum D1 of the CY 2023 OPSS/ASC final rule for the latest definitions.

5. Fecal Microbiota Procedure/Service

As discussed in the CY 2023 OPSS/ASC Final Rule (FR) (87 FR 71859 through 71860), there are three codes to describe the services associated with fecal microbiota. The long descriptors for the codes are listed below:

- G0455: Preparation with instillation of fecal microbiota by any method, including assessment of donor specimen
- 44705: Preparation of fecal microbiota for instillation, including assessment of donor specimen
- 0780T: Instillation of fecal microbiota suspension via rectal enema into lower gastrointestinal tract

We also stated in the same final rule that the only recognized Medicare code to describe the fecal microbiota service is HCPCS code G0455. This code describes the preparation and instillation of fecal microbiota by any method, including assessment of donor specimen, and does not involve the administration of any FDA approved drug. However, as listed in Table 11, attachment A, for the July 2023 Update, we are approving the live fecal microbiota item (described by HCPCS code J1440), as an OPSS pass-through drug. With the drug pass-through approval, we are making the following changes to HCPCS codes 0780T and G0455 effective July 1, 2023:

- 0780T: Reassigning the OPSS status indicator from "B" to "S" and assigning the code to APC 5734 (Level 4 Minor Procedures). This administration code should be reported with HCPCS code J1440, which has been designated as a pass-through drug. The OPSS payment for CPT code 0780T reflects only the administration service and does not include the payment for the pass-through drug. The pass-through drug is paid separately under HCPCS code J1440.
- G0455: Reassigning the OPSS status indicator from "Q1" to "T" and reassigning the code from APC 5301 (Level 1 Upper GI Procedures) to APC 5311 (Level 1 Lower GI Procedures) to appropriately reflect current medical practice. This service does not involve the administration of any FDA approved drug.

We note that we are not making any change to the OPSS status indicator for CPT code 44705. This code will continue to be assigned to status indicator "B" to indicate that another more specific code should be reported under the OPSS. In this case, the appropriate code that should be reported for the fecal microbiota procedure/service is either HCPCS code G0455 or CPT code 44705.

The payment rates and status indicators for all three codes can be found in the July 2023 OPSS Addendum B that is posted on the CMS website. For more information on the OPSS SI, refer to OPSS Addendum D1 of the CY 2023 OPSS/ASC final rule for the latest definitions.

6. Status Indicator and APC Assignment Corrections for CPT codes 0697T and 0698T Effective April 1, 2023, in the July 2023 I/OCE Update

In the CY 2023 OPSS April Addendum B, we inadvertently assigned CPT code 0697T to APC 5523 (Level 3 Imaging without Contrast) with status indicator "S" and CPT code 0698T to status indicator "N." The quantitative magnetic resonance for analysis of tissue composition (e.g., fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, described by CPT codes 0697T and 0698T was approved for placement in a New Technology APC in March of 2023; but it was too late to include the changes in the April 2023 I/OCE Update. Therefore, we are including the changes in the July 2023 I/OCE Update by re-assigning CPT codes 0697T and 0698T to APC 1511 (New Technology - Level 11 (\$901 - \$1000)) with status indicator "S" (Procedure or Service, Not Discounted When Multiple) retroactive to April 1, 2023. Table 5, attachment A, lists the long descriptors, status indicator, and APC for these codes. The payment rates for these codes can be found in Addendum B of the July 2023 OPSS Update that is posted on the CMS website.

7. New HCPCS code Describing the Endoscopic Sleeve Gastroplasty Service

CMS is establishing a new HCPCS code, C9784, to describe the endoscopic sleeve gastroplasty procedure. Table 6, attachment A, lists the official long descriptor, status indicator, and APC assignment for HCPCS code C9784. For information on OPSS status indicators, please refer to OPSS Addendum D1 of the CY 2023 OPSS/ASC final rule for the latest definitions. This code, along with its short descriptor, status indicator, and payment rate, is also listed in the July 2023 Update of the OPSS Addendum B.

8. New HCPCS Code Describing the Endoscopic Outlet Reduction Service

CMS is establishing a new HCPCS code, C9785, to describe the endoscopic outlet reduction procedure. Table 7, attachment A, lists the official long descriptor, status indicator, and APC assignment for HCPCS code C9785. For information on OPSS status indicators, please refer to OPSS Addendum D1 of the CY 2023 OPSS/ASC final rule for the latest definitions. This code, along with its short descriptor, status indicator, and payment rate, is also listed in the July 2023 Update of the OPSS Addendum B.

9. New HCPCS Code Describing Diagnostic Aid Service for Routine Functional Cardiovascular Assessment Using Echocardiography

CMS is establishing a new HCPCS code, C9786, to describe the diagnostic aid service for routine functional cardiovascular assessment using echocardiography. Table 8, attachment A, lists the official long descriptor, status indicator, and APC assignment for HCPCS code C9786. For information on OPSS status indicators, please refer to OPSS Addendum D1 of the CY 2021 OPSS/ASC final rule for the latest definitions. This code, along with its short descriptor, status indicator, and payment rate, is also listed in the July 2023 Update of the OPSS Addendum B.

10. New HCPCS Code Describing the High-resolution Gastric Electrophysiology Mapping Procedure (GEMS)

CMS is establishing a new HCPCS code, C9787, to describe Gastric Electrophysiology Mapping with Simultaneous (GEMS) patient symptom profiling. Table 9, attachment A, lists the official long descriptor, status indicator, and APC assignment for HCPCS code C9787. For information on OPSS status indicators, please refer to OPSS Addendum D1 of the CY 2023 OPSS/ASC final rule for the latest definitions. This code, along with its short descriptor, status indicator, and payment rate, is also listed in the July 2023 Update of the OPSS Addendum B.

11. Expiring Pass-through Status for One (1) Device Category HCPCS Code Effective July 1, 2023

As specified in section 1833(t)(6)(B) of the Social Security Act, under the OPSS, categories of devices are eligible for transitional pass-through payments for at least two (2), but not more than three (3) years. We note that the device category HCPCS code C1748 will remain active, however, its payment will be included in the primary service.

As a reminder, for OPSS billing, because charges related to packaged services are used for outlier and future rate setting, hospitals are advised to report the device category HCPCS codes on the claim whenever they are provided in the hospital outpatient department setting. It is extremely important that hospitals report all HCPCS codes consistent with their descriptors, CPT and/or CMS instructions, and correct coding principles, as well as all charges for all services they furnish, whether payment for the services is made separately or is packaged.

For the entire list of current and historical device category codes created since August 1, 2000, which is the implementation date of the hospital OPSS, refer to Table 10, attachment A. We note this list can also be found in Chapter 4, Section 60.4.2 (Complete List of Device Pass-through Category Codes) of the Medicare Claims Processing Manual, Pub.100-04.

12. Drugs, Biologicals, and Radiopharmaceuticals

a. New CY 2023 HCPCS Codes and Dosage Descriptors for Certain Drugs, Biologicals, and Radiopharmaceuticals Receiving Pass-Through Status

Six (6) new HCPCS codes have been created for reporting drugs and biologicals in the hospital outpatient setting, where there have not previously been specific codes available starting on July 1, 2023. These drugs and biologicals will receive drug pass-through status starting July 1, 2023. These HCPCS codes are listed in

Table 11, attachment A.

b. Existing HCPCS Codes for Certain Drugs, Biologicals, and Radiopharmaceuticals Starting Pass-Through Status as of July 1, 2023

There are two (2) existing HCPCS codes for certain drugs, biologicals, and radiopharmaceuticals in the outpatient setting that will have their pass-through status start on July 1, 2023. These codes are listed in Table 12, attachment A. Therefore, effective July 1, 2023, the status indicator for these codes is changing to status indicator = “G”.

c. Existing HCPCS Codes for Certain Drugs, Biologicals, and Radiopharmaceuticals with Pass-Through Status Ending on June 30, 2023

There are thirteen (13) HCPCS codes for certain drugs, biologicals, and radiopharmaceuticals in the outpatient setting that will have their pass-through status end on June 30, 2023. These codes are listed in Table 13, attachment A. Therefore, effective July 1, 2023, the status indicator for these codes is changing from “G” to either “K” or “N.” For more information on OPPS status indicators, refer to OPPS Addendum D1 of the Calendar Year 2023 OPPS/ASC final rule for the latest definition. These codes, along with their short descriptors and status indicators are also listed in the July 2023 Update of the OPPS Addendum B.

d. Newly Established HCPCS Codes for Drugs, Biologicals, and Radiopharmaceuticals as of April 1, 2023, that Were Not Previously Reported

Three (3) new drug, biological, and radiopharmaceutical HCPCS codes were established on April 1, 2023, and not previously reported. These HCPCS codes are listed in Table 14, attachment A.

e. Newly Established HCPCS Codes for Drugs, Biologicals, and Radiopharmaceuticals as of July 1, 2023

Fifty-nine (59) new drug, biological, and radiopharmaceutical HCPCS codes will be established on July 1, 2023. These HCPCS codes are listed in Table 15, attachment A. We are removing HCPCS code J9321 from Table 15 of this CR since this code should have never been established for the July I/OCE Update. We are also revising the short descriptor for HCPCS code J9323 in Table 15. We are noting that these changes would be made in the October I/OCE Update effective July 1, 2023, since it is too late to make these changes in the July I/OCE Update.

f. HCPCS Codes for Drug, Biological, and Radiopharmaceutical Deleted as of June 30, 2023

One (1) drug, biological, and radiopharmaceutical HCPCS code will be deleted on June 30, 2023. This HCPCS code is listed in Table 16, attachment A.

g. Drugs and Biologicals with Payments Based on Average Sales Price (ASP)

For CY 2023, payment for the majority of pass-through and nonpass-through drugs, biologicals, and therapeutic radiopharmaceuticals is generally made at a single rate of ASP plus 6 percent (or ASP plus 6 or 8 percent of the reference product for biosimilars), which provides payment for both the acquisition cost and pharmacy overhead costs of these items. Payments for drugs and biologicals based on ASPs will be updated on a quarterly basis as later quarter ASP submissions become available. Effective July 1, 2023, payment rates for many drugs and biologicals have changed from the values published in the CY 2023 OPPS/ASC final rule with comment period as a result of the new ASP calculations based on sales price submissions

from the first quarter of CY 2023. In cases where adjustments to payment rates are necessary, changes to the payment rates will be incorporated in the July 2023 Fiscal Intermediary Standard System (FISS) release. CMS is not publishing the updated payment rates in this Change Request implementing the July 2023 update of the OPSS. However, the updated payment rates effective July 1, 2023, can be found in the July 2023 update of the OPSS Addendum A and Addendum B on the CMS website at <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalOutpatientPPS>.

h. Drugs and Biologicals Based on ASP Methodology with Restated Payment Rates

Some drugs and biologicals paid based on ASP methodology will have payment rates that are corrected retroactively. These retroactive corrections typically occur on a quarterly basis. The list of drugs and biologicals with corrected payments rates will be accessible on the CMS website on the first date of the quarter at <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalOutpatientPPS/OPSS-Restated-Payment-Rates.html>

Providers may resubmit claims that were affected by adjustments to a previous quarter's payment files.

13. Skin Substitutes

The payment for skin substitute products that do not qualify for pass-through status will be packaged into the payment for the associated skin substitute application procedure. For payment packaging purposes, the skin substitute products are divided into two groups: 1) high cost skin substitute products and 2) low cost skin substitute products. New skin substitute HCPCS codes are assigned into the low-cost skin substitute group unless CMS has pricing data that demonstrates that the cost of the product is above either the mean unit cost of \$47 or the per day cost of \$837 for CY 2023.

a. Additional New Skin Substitute Products as of April 1, 2023, that Were Not Previously Reported

There were three (3) new skin substitute HCPCS codes that were active as of April 1, 2023. These codes are listed in Table 17, attachment A.

b. Additional New Skin Substitute Products as of July 1, 2023

There are twelve (12) new skin substitute HCPCS codes that will be active as of July 1, 2023. These codes are listed in Table 18, attachment A.

14. Coverage Determinations

As a reminder, the fact that a drug, device, procedure, or service is assigned a HCPCS code and a payment rate under the OPSS does not imply coverage by the Medicare program but indicates only how the product, procedure, or service may be paid if covered by the program. MACs determine whether a drug, device, procedure, or other service meets all program requirements for coverage. For example, MACs determine that it is reasonable and necessary to treat the beneficiary's condition and whether it is excluded from payment.

II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility								
		A/B MAC		H H H	M A C	D M E	Shared-System Maintainers			Other
		A	B				F I S S	M C S	V M S	
13210.1	Medicare contractors shall adjust, as appropriate, claims brought to their attention with any retroactive changes that were received prior to implementation of the July 2023 OPPS I/OCE.	X		X						

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility						
		A/B MAC			H H H	M A C	D M E	C E D I
		A	B	F I S S				
13210.2	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		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

Pre-Implementation Contact(s): Marina Kushnirova, marina.kushnirova@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: 1

Attachment A – Tables for the Policy Section

Table 1. – Covid-19 Vaccine Product and Administration CPT Codes

CPT Code	Type	Labeler	Long Descriptor
91300	Vaccine/ Product Code	Pfizer-BioNTech	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3mL_dosage, diluent reconstituted, for intramuscular use
0001A	Administration/ Immunization Code	Pfizer-BioNTech	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3mL dosage, diluent reconstituted; first dose
0002A	Administration/ Immunization Code	Pfizer-BioNTech	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3mL dosage, diluent reconstituted; second dose
0003A	Administration/ Immunization Code	Pfizer-BioNTech	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, diluent reconstituted; third dose
0004A	Administration/ Immunization Code	Pfizer-BioNTech	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, mRNALNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, diluent reconstituted; booster dose

91301	Vaccine/ Product Code	Moderna	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5mL dosage, for intramuscular use
0011A	Administration/ Immunization Code	Moderna	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5mL dosage; first dose
0012A	Administration/ Immunization Code	Moderna	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5mL dosage; second dose
0013A	Administration/ Immunization Code	Moderna	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5 mL dosage; third dose
91302	Vaccine/ Product Code	AstraZeneca/ University of Oxford	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, DNA, spike protein, chimpanzee adenovirus Oxford 1 (ChAdOx1) vector, preservative free, 5×10^{10} viral particles/0.5mL dosage, for intramuscular use
0021A	Administration/ Immunization Code	AstraZeneca/ University of Oxford	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, DNA, spike protein, chimpanzee adenovirus Oxford 1 (ChAdOx1) vector, preservative free,

			5x10 ¹⁰ viral particles/0.5mL dosage; first dose
0022A	Administration/ Immunization Code	AstraZeneca/ University of Oxford	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, DNA, spike protein, chimpanzee adenovirus Oxford 1 (ChAdOx1) vector, preservative free, 5x10 ¹⁰ viral particles/0.5mL dosage; second dose
91303	Vaccine/ Product Code	Janssen/Johnson&Johnson	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, DNA, spike protein, adenovirus type 26 (Ad26) vector, preservative free, 5x10 ¹⁰ viral particles/0.5mL dosage, for intramuscular use
0031A	Administration/ Immunization Code	Janssen/Johnson&Johnson	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, DNA, spike protein, adenovirus type 26 (Ad26) vector, preservative free, 5x10 ¹⁰ viral particles/0.5mL dosage; single dose
0034A	Administration/ Immunization Code	Janssen/Johnson&Johnson	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, DNA, spike protein, adenovirus type 26 (Ad26) vector, preservative free, 5x10 ¹⁰ viral particles/0.5mL dosage; booster dose
91304	Vaccine/ Product Code	Novavax	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, recombinant spike protein

			nanoparticle, saponin-based adjuvant, preservative free, 5 mcg/0.5mL dosage, for intramuscular use
0041A	Administration/ Immunization Code	Novavax	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, recombinant spike protein nanoparticle, saponin-based adjuvant, preservative free, 5 mcg/0.5mL dosage; first dose
0042A	Administration/ Immunization Code	Novavax	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, recombinant spike protein nanoparticle, saponin-based adjuvant, preservative free, 5 mcg/0.5mL dosage; second dose
0044A	Administration/ Immunization Code	Novavax	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, recombinant spike protein nanoparticle, saponin-based adjuvant, preservative free, 5 mcg/0.5mL dosage; booster dose
91305	Vaccine/ Product Code	Pfizer-BioNTech	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3 mL dosage,

			trissucrose formulation, for intramuscular use
0051A	Administration/ Immunization Code	Pfizer-BioNTech	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, tris-sucrose formulation; first dose
0052A	Administration/ Immunization Code	Pfizer-BioNTech	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, tris-sucrose formulation; second dose
0053A	Administration/ Immunization Code	Pfizer-BioNTech	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, tris-sucrose formulation; third dose
0054A	Administration/ Immunization Code	Pfizer-BioNTech	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, tris-sucrose formulation; booster dose
91306	Vaccine/ Product Code	Moderna	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein,

			preservative free, 50 mcg/0.25 mL dosage, for intramuscular use
0064A	Administration/ Immunization Code	Moderna	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 50 mcg/0.25 mL dosage, booster dose
91307	Vaccine/ Product Code	Pfizer-BioNTech	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 10 mcg/0.2 mL dosage, diluent reconstituted, tris-sucrose formulation, for intramuscular use
0071A	Administration/ Immunization Code	Pfizer-BioNTech	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 10 mcg/0.2 mL dosage, diluent reconstituted, tris-sucrose formulation; first dose
0072A	Administration/ Immunization Code	Pfizer-BioNTech	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 10 mcg/0.2 mL dosage, diluent reconstituted, tris-sucrose formulation; second dose
0073A	Administration/ Immunization Code	Pfizer-BioNTech	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV2) (coronavirus disease

			[COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 10 mcg/0.2 mL dosage, diluent reconstituted, tris-sucrose formulation; third dose
0074A	Administration/ Immunization Code	Pfizer-BioNTech	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV- 2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 10 mcg/0.2 mL dosage, diluent reconstituted, tris-sucrose formulation; booster dose
91308	Vaccine/ Product Code	Pfizer-BioNTech	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 3 mcg/0.2 mL dosage, diluent reconstituted, tris-sucrose formulation, for intramuscular use
0081A	Administration/ Immunization Code	Pfizer-BioNTech	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 3 mcg/0.2 mL dosage, diluent reconstituted, tris-sucrose formulation; first dose
0082A	Administration/ Immunization Code	Pfizer-BioNTech	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 3 mcg/0.2 mL dosage, diluent

			reconstituted, tris-sucrose formulation; second dose
0083A	Administration/ Immunization Code	Pfizer-BioNTech	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 3 mcg/0.2 mL dosage, diluent reconstituted, tris-sucrose formulation; third dose
91309	Vaccine/ Product Code	Moderna	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 50 mcg/0.5 mL dosage, for intramuscular use
0091A	Administration/ Immunization Code	Moderna	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 50 mcg/0.5 mL dosage; first dose, when administered to individuals 6 through 11 years
0092A	Administration/ Immunization Code	Moderna	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 50 mcg/0.5 mL dosage; second dose, when administered to individuals 6 through 11 years

0093A	Administration/ Immunization Code	Moderna	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 50 mcg/0.5mL dosage; third dose, when administered to individuals 6 through 11 years
0094A	Administration/ Immunization Code	Moderna	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 50 mcg/0.5 mL dosage; booster dose, when administered to individuals 18 years and over
91310	Vaccine/ Product Code	Sanofi Pasteur	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, monovalent, preservative free, 5 mcg/0.5 mL dosage, adjuvant AS03 emulsion, for intramuscular use
0104A	Administration/ Immunization Code	Sanofi Pasteur	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, monovalent, preservative free, 5 mcg/0.5 mL dosage, adjuvant AS03 emulsion, booster dose
91311	Vaccine/ Product Code	Moderna	Severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, mRNALNP, spike protein,

			preservative free, 25 mcg/0.25 mL dosage, for intramuscular use
0111A	Administration/ Immunization Code	Moderna	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA LNP, spike protein, preservative free, 25 mcg/0.25 mL dosage; first dose
0112A	Administration/ Immunization Code	Moderna	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA LNP, spike protein, preservative free, 25 mcg/0.25 mL dosage; second dose
0113A	Administration/ Immunization Code	Moderna	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA LNP, spike protein, preservative free, 25 mcg/0.25 mL dosage; third dose
91312	Vaccine/ Product Code	Pfizer-BioNTech	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, bivalent spike protein, preservative free, 30 mcg/0.3 mL dosage, tris-sucrose formulation, for intramuscular use
0124A	Administration/	Pfizer-BioNTech	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease

	Immunization Code		[COVID-19]) vaccine, mRNA-LNP, bivalent spike protein, preservative free, 30 mcg/0.3 mL dosage, tris-sucrose formulation, booster dose
91313	Vaccine/ Product Code	Moderna	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, bivalent, preservative free, 50 mcg/0.5 mL dosage, for intramuscular use
0134A	Administration/ Immunization Code	Moderna	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, bivalent, preservative free, 50 mcg/0.5 mL dosage, booster dose
91314	Vaccine/ Product Code	Moderna	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, bivalent, preservative free, 25 mcg/0.25 mL dosage, for intramuscular use
0144A	Administration/ Immunization Code	Moderna	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, bivalent, preservative free, 25 mcg/0.25 mL dosage, booster dose
91315	Vaccine/ Product Code	Pfizer-BioNTech	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, bivalent spike protein, preservative free, 10 mcg/0.2 mL dosage, diluent reconstituted, tris-sucrose formulation, for intramuscular use

0154A	Administration/ Immunization Code	Pfizer-BioNTech	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, bivalent spike protein, preservative free, 10 mcg/0.2 mL dosage, diluent reconstituted, tris-sucrose formulation, booster dose
91316	Vaccine/ Product Code	Moderna	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, bivalent, preservative free, 10 mcg/0.2 mL dosage, for intramuscular use
0164A	Administration/ Immunization Code	Moderna	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, bivalent, preservative free, 10 mcg/0.2 mL dosage, booster dose
91317	Vaccine/ Product Code	Pfizer-BioNTech	Severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, bivalent spike protein, preservative free, 3 mcg/0.2 mL dosage, diluent reconstituted, tris-sucrose formulation, for intramuscular use
0173A	Administration/ Immunization Code	Pfizer-BioNTech	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, bivalent spike protein, preservative free, 3 mcg/0.2 mL dosage, diluent reconstituted, tris-sucrose formulation, third dose

0174A	Administration/ Immunization Code	Pfizer-BioNTech	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, bivalent spike protein, preservative free, 3 mcg/0.2 mL dosage, diluent reconstituted, tris-sucrose formulation; booster dose
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Table 2. – PLA Coding Changes Effective July 1, 2023

CPT Code	Long Descriptor	OPPS SI
0387U	Oncology (melanoma), autophagy and beclin 1 regulator 1 (AMBRA1) and loricrin (AMLo) by immunohistochemistry, formalin-fixed paraffin-embedded (FFPE) tissue, report for risk of progression	Q4
0388U	Oncology (non-small cell lung cancer), next-generation sequencing with identification of single nucleotide variants, copy number variants, insertions and deletions, and structural variants in 37 cancer-related genes, plasma, with report for alteration detection	A
0389U	Pediatric febrile illness (Kawasaki disease [KD]), interferon alpha-inducible protein 27 (IFI27) and mast cell-expressed membrane protein 1 (MCEMP1), RNA, using reverse transcription polymerase chain reaction (RT-qPCR), blood, reported as a risk score for KD	A
0390U	Obstetrics (preeclampsia), kinase insert domain receptor (KDR), Endoglin (ENG), and retinol-binding protein 4 (RBP4), by immunoassay, serum, algorithm reported as a risk score	Q4
0391U	Oncology (solid tumor), DNA and RNA by next-generation sequencing, utilizing formalin-fixed paraffin-embedded (FFPE) tissue, 437 genes, interpretive report for single nucleotide variants, splice site variants, insertions/deletions, copy number alterations, gene fusions, tumor mutational burden, and microsatellite instability, with algorithm quantifying immunotherapy response score	A

0392U	Drug metabolism (depression, anxiety, attention deficit hyperactivity disorder [ADHD]), gene-drug interactions, variant analysis of 16 genes, including deletion/duplication analysis of CYP2D6, reported as impact of gene-drug interaction for each drug	A
0393U	Neurology (eg, Parkinson disease, dementia with Lewy bodies), cerebrospinal fluid (CSF), detection of misfolded α -synuclein protein by seed amplification assay, qualitative	Q4
0394U	Perfluoroalkyl substances (PFAS) (eg, perfluorooctanoic acid, perfluorooctane sulfonic acid), 16 PFAS compounds by liquid chromatography with tandem mass spectrometry (LC-MS/MS), plasma or serum, quantitative	Q4
0395U	Oncology (lung), multi-omics (microbial DNA by shotgun nextgeneration sequencing and carcinoembryonic antigen and osteopontin by immunoassay), plasma, algorithm reported as malignancy risk for lung nodules in early-stage disease	A
0396U	Obstetrics (pre-implantation genetic testing), evaluation of 300000 DNA single-nucleotide polymorphisms (SNPs) by microarray, embryonic tissue, algorithm reported as a probability for single-gene germline conditions	E1
0397U	Oncology (non-small cell lung cancer), cell-free DNA from plasma, targeted sequence analysis of at least 109 genes, including sequence variants, substitutions, insertions, deletions, select rearrangements, and copy number variations	A
0398U	Gastroenterology (Barrett esophagus), P16, RUNX3, HPP1, and FBN1 DNA methylation analysis using PCR, formalin-fixed paraffin-embedded (FFPE) tissue, algorithm reported as risk score for progression to high-grade dysplasia or cancer	A
0399U	Neurology (cerebral folate deficiency), serum, detection of anti-human folate receptor IgGbinding antibody and blocking autoantibodies by enzyme-linked immunoassay (ELISA), qualitative, and blocking autoantibodies, using a functional blocking assay for IgG or IgM, quantitative, reported as positive or not detected	Q4

0400U	Obstetrics (expanded carrier screening), 145 genes by nextgeneration sequencing, fragment analysis and multiplex ligationdependent probe amplification, DNA, reported as carrier positive or negative	E1
0401U	Cardiology (coronary heart disease [CAD]), 9 genes (12 variants), targeted variant genotyping, blood, saliva, or buccal swab, algorithm reported as a genetic risk score for a coronary event	A

Table 3. – Advanced Diagnostic Laboratory Tests (ADLT) Under the Clinical Lab Fee Schedule (CLFS)

Lab Name	Test Name	CPT Code	CPT Long Descriptor
Prelude	DCISionRT®	0295U	Oncology (breast ductal carcinoma in situ), protein expression profiling by immunohistochemistry of 7 proteins (cox2, foxa1, her2, ki-67, p16, pr, siah2), with 4 clinicopathologic factors (size, age, margin status, palpability), utilizing formalin-fixed paraffin-embedded (ffpe) tissue, algorithm reported as a recurrence risk score

Table 4. – CPT Category III Codes Effective July 1, 2023

CPT Code	Long Descriptor	July 2023 OPSS SI	July 2023 OPSS APC	July 2023 OPSS APC Group Title
0791T	Motor-cognitive, semi-immersive virtual reality–facilitated gait training, each 15 minutes (List separately in addition to code for primary procedure)	A	N/A	N/A
0792T	Application of silver diamine fluoride 38%, by a physician or other qualified health care professional	E1	N/A	N/A
0793T	Percutaneous transcatheter thermal ablation of nerves innervating the pulmonary arteries, including right heart catheterization, pulmonary artery angiography, and all imaging guidance	J1	5194	Level 4 Endovascular Procedures

0794T	Patient-specific, assistive, rules-based algorithm for ranking pharmaco-oncologic treatment options based on the patient's tumor-specific cancer marker information obtained from prior molecular pathology, immunohistochemical, or other pathology results which have been previously interpreted and reported separately	S	5733	Level 3 Minor Procedures
0795T	Transcatheter insertion of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography) and device evaluation (eg, interrogation or programming), when performed; complete system (ie, right atrial and right ventricular pacemaker components)	E1	N/A	N/A
0796T	Transcatheter insertion of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography) and device evaluation (eg, interrogation or programming), when performed; right atrial pacemaker component (when an existing right ventricular single leadless pacemaker exists to create a dual-chamber leadless pacemaker system)	E1	N/A	N/A
0797T	Transcatheter insertion of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography) and device evaluation (eg, interrogation or programming), when performed; right ventricular pacemaker component (when part of a dual-chamber leadless pacemaker system)	J1	5194	Level 4 Endovascular Procedures
0798T	Transcatheter removal of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography), when performed; complete system (ie, right atrial and right ventricular pacemaker components)	E1	N/A	N/A
0799T	Transcatheter removal of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography), when performed; right atrial pacemaker component	E1	N/A	N/A

0800T	Transcatheter removal of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography), when performed; right ventricular pacemaker component (when part of a dual-chamber leadless pacemaker system)	J1	5183	Level 3 Vascular Procedures
0801T	Transcatheter removal and replacement of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography) and device evaluation (eg, interrogation or programming), when performed; dual-chamber system (ie, right atrial and right ventricular pacemaker components)	E1	N/A	N/A
0802T	Transcatheter removal and replacement of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography) and device evaluation (eg, interrogation or programming), when performed; right atrial pacemaker component	E1	N/A	N/A
0803T	Transcatheter removal and replacement of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography) and device evaluation (eg, interrogation or programming), when performed; right ventricular pacemaker component (when part of a dual-chamber leadless pacemaker system)	J1	5194	Level 4 Endovascular Procedures
0804T	Programming device evaluation (in person) with iterative adjustment of implantable device to test the function of device and to select optimal permanent programmed values, with analysis, review, and report, by a physician or other qualified health care professional, leadless pacemaker system in dual cardiac chambers	Q1	5741	Level 1 Electronic Analysis of Devices
0805T	Transcatheter superior and inferior vena cava prosthetic valve implantation (ie, caval valve implantation [CAVI]); percutaneous femoral vein approach	C	N/A	N/A
0806T	Transcatheter superior and inferior vena cava prosthetic valve implantation (ie, caval valve implantation [CAVI]); open femoral vein approach	C	N/A	N/A

0807T	Pulmonary tissue ventilation analysis using software-based processing of data from separately captured cinefluorograph images; in combination with previously acquired computed tomography (CT) images, including data preparation and transmission, quantification of pulmonary tissue ventilation, data review, interpretation and report	S	5721	Level 1 Diagnostic Tests and Related Services
0808T	Pulmonary tissue ventilation analysis using software-based processing of data from separately captured cinefluorograph images; in combination with computed tomography (CT) images taken for the purpose of pulmonary tissue ventilation analysis, including data preparation and transmission, quantification of pulmonary tissue ventilation, data review, interpretation and report	S	5722	Level 2 Diagnostic Tests and Related Services
0809T	Arthrodesis, sacroiliac joint, percutaneous or minimally invasive (indirect visualization), with image guidance, placement of transfixing device(s) and intraarticular implant(s), including allograft or synthetic device(s)	J1	5116	Level 6 Musculoskeletal Procedures
0810T	Subretinal injection of a pharmacologic agent, including vitrectomy and 1 or more retinotomies	E1	N/A	N/A

Table 5. — CY 2023 OPPS Status Indicator and New Technology APC Assignments for the Quantitative Magnetic Resonance for Analysis of Tissue Composition (eg, Fat, Iron, Water Content), Including Multiparametric Data Acquisition, Data Preparation and Transmission, Interpretation and Report

HCPCS Code	Short Descriptor	Long Descriptor	SI	APC
0697T	Quan mr tis wo mri mlt orgn	Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, obtained without diagnostic mri examination of the same anatomy (eg, organ, gland, tissue, target structure) during the same session; multiple organs	S	1511
0698T	Quan mr tiss w/mri mlt orgn	Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, obtained with diagnostic mri examination of the same	S	1511

		anatomy (eg, organ, gland, tissue, target structure); multiple organs (list separately in addition to code for primary procedure)		
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Table 6. – CY 2023 OPPS Status Indicator and New Technology APC Assignments for the Endoscopic Sleeve Gastroplasty Service

HCPCS Code	Short Descriptor	Long Descriptor	SI	APC
C9784	Endo sleeve gastro w/tube	Gastric restrictive procedure, endoscopic sleeve gastroplasty, with esophagogastroduodenoscopy and intraluminal tube insertion, if performed, including all system and tissue anchoring components	J1	5362

Table 7. – CY 2023 OPPS Status Indicator and New Technology APC Assignments for the Endoscopic Outlet Reduction Service

HCPCS Code	Short Descriptor	Long Descriptor	SI	APC
C9785	Endo outlet restrict w/tube	Endoscopic outlet reduction, gastric pouch application, with endoscopy and intraluminal tube insertion, if performed, including all system and tissue anchoring components	J1	5362

Table 8. – CY 2023 OPPS Status Indicator and APC Assignments for Routine Functional Cardiovascular Assessment Using Echocardiography

HCPCS Code	Short Descriptor	Long Descriptor	SI	APC
C9786	Echo cad for hf preserved ef	Echocardiography image post processing for computer aided detection of heart failure with preserved ejection fraction, including interpretation and report	S	5742

Table 9. – CY 2023 OPPS Status Indicator and APC Assignments for the GEMS Procedure

HCPCS Code	Short Descriptor	Long Descriptor	SI	APC
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C9787	Gastric ep mapg simult pt sx	Gastric electrophysiology mapping with simultaneous patient symptom profiling	S	5723
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Table 10.— List of Device Category HCPCS Codes and Definitions Used for Present and Previous Pass-Through Payment ***

	HCPCS Codes	Category Long Descriptor	Date First Populated	Pass-Through Expiration Date***
1.	C1883*	Adaptor/extension, pacing lead or neurostimulator lead (implantable)	8/1/2000	12/31/2002
2.	C1765*	Adhesion barrier	10/01/00 – 3/31/2001; 7/1/2001	12/31/2003
3.	C1713*	Anchor/screw for opposing bone-to-bone or soft tissue-to-bone (implantable)	8/1/2000	12/31/2002
4.	L8690	Auditory osseointegrated device, includes all internal and external components	1/1/2007	12/31/2008
5.	C1832	Autograft suspension, including cell processing and application, and all system components	1/1/2022	12/31/2024
6.	C1715	Brachytherapy needle	8/1/2000	12/31/2002
7.	C1716#	Brachytherapy source, non-stranded, Gold-198, per source	10/1/2000	12/31/2002
8.	C1717#	Brachytherapy source, non-stranded, high dose rate Iridium-192, per source	1/1/2001	12/31/2002
9.	C1718#	Brachytherapy source, Iodine 125, per source	8/1/2000	12/31/2002
10.	C1719#	Brachytherapy source, non-stranded, non-high dose rate Iridium-192, per source	10/1/2000	12/31/2002
11.	C1720#	Brachytherapy source, Palladium 103, per source	8/1/2000	12/31/2002
12.	C2616#	Brachytherapy source, non-stranded, Yttrium-90, per source	1/1/2001	12/31/2002
13.	C2632	Brachytherapy solution, iodine – 125, per mCi	1/1/2003	12/31/2004
14.	C1721	Cardioverter-defibrillator, dual chamber (implantable)	8/1/2000	12/31/2002
15.	C1882*	Cardioverter-defibrillator, other than single or dual chamber (implantable)	8/1/2000	12/31/2002
16.	C1722	Cardioverter-defibrillator, single chamber (implantable)	8/1/2000	12/31/2002
17.	C1888*	Catheter, ablation, non-cardiac, endovascular (implantable)	7/1/2002	12/31/2004
18.	C1726*	Catheter, balloon dilatation, non-vascular	8/1/2000	12/31/2002
19.	C1727*	Catheter, balloon tissue dissector, non-vascular (insertable)	8/1/2000	12/31/2002
20.	C1728	Catheter, brachytherapy seed administration	1/1/2001	12/31/2002
21.	C1729*	Catheter, drainage	10/1/2000	12/31/2002

22.	C1730*	Catheter, electrophysiology, diagnostic, other than 3D mapping (19 or fewer electrodes)	8/1/2000	12/31/2002
23.	C1731*	Catheter, electrophysiology, diagnostic, other than 3D	8/1/2000	12/31/2002

		mapping (20 or more electrodes)		
24.	C1732*	Catheter, electrophysiology, diagnostic/ablation, 3D or vector mapping	8/1/2000	12/31/2002
25.	C1733*	Catheter, electrophysiology, diagnostic/ablation, other than 3D or vector mapping, other than cool-tip	8/1/2000	12/31/2002
26.	C2630*	Catheter, electrophysiology, diagnostic/ablation, other than 3D or vector mapping, cool-tip	10/1/2000	12/31/2002
27.	C1886	Catheter, extravascular tissue ablation, any modality (insertable)	01/1/2012	12/31/2013
28.	C1887*	Catheter, guiding (may include infusion/perfusion capability)	8/1/2000	12/31/2002
29.	C1750	Catheter, hemodialysis/peritoneal, long-term	8/1/2000	12/31/2002
30.	C1752	Catheter, hemodialysis/peritoneal, short-term	8/1/2000	12/31/2002
31.	C1751	Catheter, infusion, inserted peripherally, centrally or midline (other than hemodialysis)	8/1/2000	12/31/2002
32.	C1759	Catheter, intracardiac echocardiography	8/1/2000	12/31/2002
33.	C1754	Catheter, intradiscal	10/1/2000	12/31/2002
34.	C1755	Catheter, intraspinal	8/1/2000	12/31/2002
35.	C1753	Catheter, intravascular ultrasound	8/1/2000	12/31/2002
36.	C2628	Catheter, occlusion	10/1/2000	12/31/2002
37.	C1756	Catheter, pacing, transesophageal	10/1/2000	12/31/2002
39.	C2627	Catheter, suprapubic/cystoscopic	10/1/2000	12/31/2002
40.	C1757	Catheter, thrombectomy/embolectomy	8/1/2000	12/31/2002
41.	C2623	Catheter, transluminal angioplasty, drug-coated, non-laser	4/1/2015	12/31/2017
42.	C1885*	Catheter, transluminal angioplasty, laser	10/1/2000	12/31/2002
43.	C1725*	Catheter, transluminal angioplasty, non-laser (may include guidance, infusion/perfusion capability)	8/1/2000	12/31/2002
44.	C1714	Catheter, transluminal atherectomy, directional	8/1/2000	12/31/2002
45.	C1724	Catheter, transluminal atherectomy, rotational	8/1/2000	12/31/2002
46.	C1761	Catheter, transluminal intravascular lithotripsy, coronary	7/1/2021	6/30/2024
47.	C1760*	Closure device, vascular (implantable/insertable)	8/1/2000	12/31/2002
48.	L8614	Cochlear implant system	8/1/2000	12/31/2002
49.	C1762*	Connective tissue, human (includes fascia lata)	8/1/2000	12/31/2002
50.	C1763*	Connective tissue, non-human (includes synthetic)	10/1/2000	12/31/2002
51.	C1881	Dialysis access system (implantable)	8/1/2000	12/31/2002
52.	C1884*	Embolization protective system	1/01/2003	12/31/2004

53.	C1749	Endoscope, retrograde imaging/illumination colonoscope device (implantable)	10/1/2010	12/31/2012
54.	C1748	Endoscope, single-use (i.e. disposable), Upper GI, imaging/illumination device (insertable)	7/1/2020	6/30/2023
55.	C1764	Event recorder, cardiac (implantable)	8/1/2000	12/31/2002
57.	C1822	Generator, neurostimulator (implantable), high frequency, with rechargeable battery and charging system	1/1/2016	12/31/2017
58.	C1767**	Generator, neurostimulator (implantable), non-rechargeable	8/1/2000	12/31/2002
59.	C1820	Generator, neurostimulator (implantable), with rechargeable battery and charging system	1/1/2006	12/31/2007
60.	C1825	Generator, neurostimulator (implantable), non-rechargeable with carotid sinus baroreceptor stimulation lead(s)	1/1/2021	12/31/2023
61.	C1823	Generator, neurostimulator (implantable), nonrechargeable , with transvenous sensing and stimulation leads	1/1/2019	12/31/2022
62.	C1768	Graft, vascular	1/1/2001	12/31/2002
63.	C1769	Guide wire	8/1/2000	12/31/2002
64.	C1052	Hemostatic agent, gastrointestinal, topical	1/1/2021	12/31/2023
65.	C1770	Imaging coil, magnetic resonance (insertable)	1/1/2001	12/31/2002
66.	C2624	Implantable wireless pulmonary artery pressure sensor with delivery catheter, including all system components	1/1/2015	12/31/2016
67.	C1891	Infusion pump, non-programmable, permanent (implantable)	8/1/2000	12/31/2002
68.	C2626*	Infusion pump, non-programmable, temporary (implantable)	1/1/2001	12/31/2002
69.	C1772	Infusion pump, programmable (implantable)	10/1/2000	12/31/2002
70.	C1818*	Integrated keratoprosthesis	7/1/2003	12/31/2005
71.	C1821	Interspinous process distraction device (implantable)	1/1/2007	12/31/2008
72.	C1062	Intravertebral body fracture augmentation with implant (e.g., metal, polymer)	1/1/2021	12/31/2023
73.	C1893	Introducer/sheath, guiding, intracardiac electrophysiological, fixed-curve, other than peel-away	10/1/2000	12/31/2002
74.	C1892*	Introducer/sheath, guiding, intracardiac electrophysiological, fixed-curve, peel-away	1/1/2001	12/31/2002
75.	C1766	Introducer/sheath, guiding, intracardiac electrophysiological, steerable, other than peel-away	1/1/2001	12/31/2002
76.	C1894	Introducer/sheath, other than guiding, other than intracardiac electrophysiological, non-laser	8/1/2000	12/31/2002
77.	C2629	Introducer/sheath, other than guiding, other than intracardiac electrophysiological, laser	1/1/2001	12/31/2002
79.	C1776*	Joint device (implantable)	10/1/2000	12/31/2002

80.	C1895	Lead, cardioverter-defibrillator, endocardial dual coil (implantable)	8/1/2000	12/31/2002
81.	C1777	Lead, cardioverter-defibrillator, endocardial single coil (implantable)	8/1/2000	12/31/2002
82.	C1896	Lead, cardioverter-defibrillator, other than endocardial single or dual coil (implantable)	8/1/2000	12/31/2002
83.	C1900*	Lead, left ventricular coronary venous system	7/1/2002	12/31/2004
84.	C1778	Lead, neurostimulator (implantable)	8/1/2000	12/31/2002
85.	C1897	Lead, neurostimulator test kit (implantable)	8/1/2000	12/31/2002
86.	C1898	Lead, pacemaker, other than transvenous VDD single pass	8/1/2000	12/31/2002
87.	C1779*	Lead, pacemaker, transvenous VDD single pass	8/1/2000	12/31/2002
88.	C1899	Lead, pacemaker/cardioverter-defibrillator combination (implantable)	1/1/2001	12/31/2002
89.	C1780*	Lens, intraocular (new technology)	8/1/2000	12/31/2002
90.	C1840	Lens, intraocular (telescopic)	10/1/2011	12/31/2013
91.	C2613	Lung biopsy plug with delivery system	7/1/2015	12/31/2017
92.	C1878*	Material for vocal cord medialization, synthetic (implantable)	10/1/2000	12/31/2002
93.	C1781*	Mesh (implantable)	8/1/2000	12/31/2002
94.	C1833	Monitor, cardiac, including intracardiac lead and all system components (implantable)	1/1/2022	12/31/2024
95.	C1782*	Morcellator	8/1/2000	12/31/2002
96.	C1784*	Ocular device, intraoperative, detached retina	1/1/2001	12/31/2002
97.	C1783	Ocular implant, aqueous drainage assist device	7/1/2002	12/31/2004
99.	C2619	Pacemaker, dual chamber, non rate-responsive (implantable)	8/1/2000	12/31/2002
100.	C1785	Pacemaker, dual chamber, rate-responsive (implantable)	8/1/2000	12/31/2002
101.	C2621*	Pacemaker, other than single or dual chamber (implantable)	1/1/2001	12/31/2002
102.	C2620	Pacemaker, single chamber, non rate-responsive (implantable)	8/1/2000	12/31/2002
103.	C1786	Pacemaker, single chamber, rate-responsive (implantable)	8/1/2000	12/31/2002
104.	C1787*	Patient programmer, neurostimulator	8/1/2000	12/31/2002
105.	C1831	Interbody cage, anterior, lateral or posterior, personalized (implantable)	10/1/2021	9/30/2024
106.	C1788	Port, indwelling (implantable)	8/1/2000	12/31/2002
107.	C1830	Powered bone marrow biopsy needle	10/1/2011	12/31/2013
108.	C2618	Probe, cryoablation	4/1/2001	12/31/2003
110.	C2614	Probe, percutaneous lumbar discectomy	1/1/2003	12/31/2004
111.	C1789	Prosthesis, breast (implantable)	10/1/2000	12/31/2002

112.	C1813	Prosthesis, penile, inflatable	8/1/2000	12/31/2002
113.	C2622	Prosthesis, penile, non-inflatable	10/1/2001	12/31/2002
114.	C1815	Prosthesis, urinary sphincter (implantable)	10/1/2000	12/31/2002
115.	C1816	Receiver and/or transmitter, neurostimulator (implantable)	8/1/2000	12/31/2002
116.	C1771*	Repair device, urinary, incontinence, with sling graft	10/1/2000	12/31/2002
117.	C2631*	Repair device, urinary, incontinence, without sling graft	8/1/2000	12/31/2002
118.	C1841	Retinal prosthesis, includes all internal and external components	10/1/2013	12/31/2015
119.	C1814*	Retinal tamponade device, silicone oil	4/1/2003	12/31/2005
120.	C1773*	Retrieval device, insertable	1/1/2001	12/31/2002
121.	C2615*	Sealant, pulmonary, liquid (implantable)	1/1/2001	12/31/2002
122.	C1817*	Septal defect implant system, intracardiac	8/1/2000	12/31/2002
123.	C1874*	Stent, coated/covered, with delivery system	8/1/2000	12/31/2002
124.	C1875*	Stent, coated/covered, without delivery system	8/1/2000	12/31/2002
125.	C1876*	Stent, non-coated/non-covered, with delivery system	8/1/2000	12/31/2002
126.	C1877	Stent, non-coated/non-covered, without delivery system	8/1/2000	12/31/2002
127.	C2625*	Stent, non-coronary, temporary, with delivery system	10/1/2000	12/31/2002
128.	C2617*	Stent, non-coronary, temporary, without delivery system	10/1/2000	12/31/2002
129.	C1819	Tissue localization excision device	1/1/2004	12/31/2005
130.	C1879*	Tissue marker (implantable)	8/1/2000	12/31/2002
131.	C1880	Vena cava filter	1/1/2001	12/31/2002
132	C1826	Generator, neurostimulator (implantable), includes closed feedback loop leads and all implantable components, with rechargeable battery and charging system	1/1/2023	12/31/2025
133	C1827	Generator, neurostimulator (implantable), non-rechargeable, with implantable stimulation lead and external paired stimulation controller	1/1/2023	12/31/2025
134	C1747	Endoscope, single-use (i.e. disposable), urinary tract, imaging/illumination device (insertable)	1/1/2023	12/31/2025
135	C1824^	Generator, cardiac contractility modulation (implantable)	1/1/2020	12/31/2023
136	C1982^	Catheter, pressure-generating, one-way valve, intermittently occlusive	1/1/2020	12/31/2023
137	C1839^	Iris prosthesis	1/1/2020	12/31/2023
138	C1734^	Orthopedic/device/drug matrix for opposing bone-to-bone or soft tissue-to bone (implantable)	1/1/2020	12/31/2023
139	C2596^	Probe, image-guided, robotic, waterjet ablation	1/1/2020	12/31/2023

BOLD codes are still actively receiving pass-through payment.

Italicized codes have received preliminary approval for pass-through payment.

*** Refer to the definition below for further information on this device category code.**

**** Effective 1/1/06 C1767 descriptor was changed for succeeding claims. See CR 4250, Jan. 3, 2006 for details.**

***** Although the pass-through payment status for device category codes has expired, these codes are still active and hospitals are still required to report the device category C-codes (except the brachytherapy source codes, which are separately paid under the OPPS) on claims when such devices are used in conjunction with procedures billed and paid under the OPPS.**

^Sec. 4141. Extension of Pass-Through Status Under the Medicare Program for Certain Devices Impacted by COVID-19 of the Consolidated Appropriations Act, 2023 has extended pass-through status for a 1-year period beginning on January 1, 2023

Table 11. — New CY 2023 HCPCS Codes Effective July 1, 2023 for Certain Drugs, Biologicals, and Radiopharmaceuticals Receiving Pass-Through Status

CY 2023 HCPCS Code	CY 2023 Long Descriptor	CY 2023 SI	CY 2023 APC
C9151	Injection, pegcetacoplan, 1 mg	G	9158
J1440	Fecal microbiota, live - jslm, 1 ml	G	9142
J1961	Injection, lenacapavir, 1 mg	G	9155
J2329	Injection, ublituximab-xiiy, 1mg	G	9149
J9056	Injection, bendamustine hydrochloride (vivimusta), 1 mg	G	9154
J9350	Injection, mosunetuzumab-axgb, 1 mg	G	9150

Table 12. — Existing HCPCS Codes for Certain Drugs, Biologicals, and Radiopharmaceuticals Starting Pass-Through Status as of July 1, 2023

CY 2023 HCPCS Code	CY 2023 Long Descriptor	April 2023 SI	July 2023 SI	July 2023 APC
J0208	Injection, sodium thiosulfate, 100 mg	K	G	9119
Q5129	Injection, bevacizumab-adcd (vezgelma), biosimilar, 10 mg	E2	G	9159

Table 13. — HCPCS Codes for Certain Drugs, Biologicals, and Radiopharmaceuticals with Pass-Through Status Ending Effective June 30, 2023

CY 2023 HCPCS Code	CY 2023 Long Descriptor	April 2023 SI	July 2023 SI	July 2023 APC
J0742	Injection, imipenem 4 mg, cilastatin 4 mg and relebactam 2 mg	G	K	9362
J0896	Injection, luspatercept-aamt, 0.25 mg	G	K	9347
J1429	Injection, golodirsén, 10 mg	G	K	9356
J1738	Injection, meloxicam, 1 mg	G	N	N/A
J3032	Injection, eptinezumab-jjmr, 1 mg	G	K	9357
J3241	Injection, teprotumumab-trbw, 10 mg	G	K	9355
J7204	Injection, factor VIII, antihemophilic factor (recombinant), (esperoct), glycopegylated-exei, per iu	G	K	9354
J7402	Mometasone furoate sinus implant, (sinuva), 10 micrograms	G	K	9346
J9177	Injection, enfortumab vedotin-ejfv, 0.25 mg	G	K	9364
J9358	Injection, fam-trastuzumab deruxtecan-nxki, 1 mg	G	K	9353
Q5116	Injection, trastuzumab-qyyp, biosimilar, (trazimera), 10 mg	G	K	9350
Q5118	Injection, bevacizumab-bvcr, biosimilar, (zirabev), 10 mg	G	K	9348
Q5119	Injection, rituximab-pvvr, biosimilar, (ruxience), 10 mg	G	K	9367

Table 14. — Newly Established HCPCS Codes for Drugs, Biologicals, and Radiopharmaceuticals as of April 1, 2023, that Were Not Previously Reported

New HCPCS Code	Old HCPCS Code	Long Descriptor	SI	APC
A2019		Kerecis omega3 marigen shield, per square centimeter	N	N/A
A2020		Ac5 advanced wound system (ac5)	N	N/A
A2021		Neomatrix, per square centimeter	N	N/A

Table 15. – Newly Established HCPCS Codes for Drugs, Biologicals, and Radiopharmaceuticals as of July 1, 2023

New HCPCS Code	Old HCPCS Code	Long Descriptor	SI	APC
C9150		Xenon Xe-129 hyperpolarized gas, diagnostic, per study dose	N	
C9151		Injection, pegcetacoplan, 1 mg	G	9158
J0137		Injection, acetaminophen (hikma) not therapeutically equivalent to J0131, 10 mg	N	
J0206		Injection, allopurinol sodium, 1 mg	N	
J0216		Injection, alfentanil hydrochloride, 500 micrograms	N	
J0457		Injection, aztreonam, 100 mg	N	
J0665		Injection, bupivacaine, not otherwise specified, 0.5 mg	N	
J0736		Injection, clindamycin phosphate, 300 mg	N	
J0737		Injection, clindamycin phosphate (baxter), not therapeutically equivalent to J0736, 300 mg	N	
J1440		Fecal microbiota, live - jslm, 1 ml	G	9142
J1576		Injection, immune globulin (panzyga), intravenous, non-lyophilized (e.g., liquid), 500 mg	K	9144
J1805		Injection, esmolol hydrochloride, 10 mg	N	
J1806		Injection, esmolol hydrochloride (wg critical care) not therapeutically equivalent to J1805, 10 mg	N	
J1811		Insulin (fiasp) for administration through dme (i.e., insulin pump) per 50 units	N	
J1812		Insulin (fiasp), per 5 units	N	
J1813		Insulin (lyumjev) for administration through dme (i.e., insulin pump) per 50 units	N	
J1814		Insulin (lyumjev), per 5 units	N	
J1836		Injection, metronidazole, 10 mg	N	
J1920		Injection, labetalol hydrochloride, 5 mg	N	
J1921		Injection, labetalol hydrochloride (hikma) not therapeutically equivalent to J1820, 5 mg	N	
J1941		Injection, furosemide (furoscix), 20 mg	E1	

New HCPCS Code	Old HCPCS Code	Long Descriptor	SI	APC
J1961		Injection, lenacapavir, 1 mg	G	9155
J2249		Injection, remimazolam, 1 mg	N	
J2305		Injection, nitroglycerin, 5 mg	N	
J2329		Injection, ublituximab-xiyy, 1mg	G	9149
J2371		Injection, phenylephrine hydrochloride, 20 micrograms	N	
J2372		Injection, phenylephrine hydrochloride (biorphen), 20 micrograms	N	
J2427		Injection, paliperidone palmitate extended release (invega hafyera, or invega trinza), 1 mg	K	9145
J2561		Injection, phenobarbital sodium (sezaby), 1 mg	N	
J2598		Injection, vasopressin, 1 unit	N	
J2599		Injection, vasopressin (american regent) not therapeutically equivalent to J2595, 1 unit	N	
J2806		Injection, sincalide (maia) not therapeutically equivalent to j2805, 5 micrograms	N	
J7213		Injection, coagulation factor ix (recombinant), ixinity, 1 i.u.	K	9146
J9029		Injection, nadofaragene firadenovec-vncg, per therapeutic dose	E2	
J9056		Injection, bendamustine hydrochloride (vivimusta), 1 mg	G	9154
J9058		Injection, bendamustine hydrochloride (apotex), 1 mg	K	9151
J9059		Injection, bendamustine hydrochloride (baxter), 1 mg	K	9153
J9063	C9146	Injection, mirvetuximab soravtansine-gynx, 1 mg	G	9109
J9259		Injection, paclitaxel protein-bound particles (american regent) not therapeutically equivalent to j9264, 1 mg	K	9152
J9322		Injection, pemetrexed (bluepoint) not therapeutically equivalent to J9305, 10 mg	K	9148
J9323		Injection, pemetrexed ditromethamine, 10 mg	K	9156
J9347	C9147	Injection, tremelimumab-actl, 1 mg	G	9110
J9350		Injection, mosunetuzumab-axgb, 1 mg	G	9150
J9380	C9148	Injection, teclistamab-cqyv, 0.5 mg	G	9111
J9381	C9149	Injection, teplizumab-mzww, 5 mcg	G	9112
Q4272		Esano a, per square centimeter	N	
Q4273		Esano aaa, per square centimeter	N	
Q4274		Esano ac, per square centimeter	N	
Q4275		Esano aca, per square centimeter	N	
Q4276		Orion, per square centimeter	N	

New HCPCS Code	Old HCPCS Code	Long Descriptor	SI	APC
Q4277		Woundplus membrane or e-graft, per square centimeter	N	
Q4278		Epieffect, per square centimeter	N	
Q4280		Xcell amnio matrix, per square centimeter	N	
Q4281		Barrera sl or barrera dl, per square centimeter	N	
Q4282		Cygnus dual, per square centimeter	N	
Q4283		Biovance tri-layer or biovance 3l, per square centimeter	N	
Q4284		Dermabind sl, per square centimeter	N	
Q5131		Injection, adalimumab-aacf (idacio), biosimilar, 20 mg	E2	

Table 16. – HCPCS Code for Drug, Biological, and Radiopharmaceutical Deleted as of June 30, 2023

CY 2023 HCPCS Code	Long Descriptor	CY 2023 SI	APC
J2370	Injection, phenylephrine hcl, up to 1 ml	N	N/A

Table 17. – New Skin Substitute Products Low Cost Group/High Cost Group Assignment Effective April 1, 2023, that Were Not Previously Reported

CY 2023 HCPCS Code	Short Descriptor	CY 2023 SI	Low/High Cost Skin Substitute
A2019	Kerecis marigen shld sq cm	N	High
A2020	Ac5 wound system	N	High
A2021	Neomatrix per sq cm	N	High

Table 18. – New Skin Substitute Products Low Cost Group/High Cost Group Assignment Effective July 1, 2023

CY 2023 HCPCS Code	Short Descriptor	CY 2023 SI	Low/High Cost Skin Substitute
Q4272	Esano a, per sq cm	N	Low
Q4273	Esano aaa, per sq cm	N	Low
Q4274	Esano ac, per sq cm	N	Low
Q4275	Esano aca, per sq cm	N	Low
Q4276	Orion, per sq cm	N	Low
Q4277	Woundplus e-grat, per sq cm	N	Low
Q4278	Epieffect, per sq cm	N	Low
Q4280	Xcell amnio matrix per sq cm	N	Low
Q4281	Barrera slor dl per sq cm	N	Low
Q4282	Cygnus dual per sq cm	N	Low
Q4283	Biovance tri or 3l, sq cm	N	Low
Q4284	Dermabind sl, per sq cm	N	Low