CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 10667	Date: March 8, 2021
	<b>Change Request 12187</b>

SUBJECT: April 2021 Integrated Outpatient Code Editor (I/OCE) Specifications Version 22.1

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

#### **EFFECTIVE DATE: April 1, 2021**

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

**IMPLEMENTATION DATE: April 5, 2021** 

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:10667 | Date: March 8, 2021 | Change Request: 12187

SUBJECT: April 2021 Integrated Outpatient Code Editor (I/OCE) Specifications Version 22.1

**EFFECTIVE DATE: April 1, 2021** 

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

**IMPLEMENTATION DATE: April 5, 2021** 

#### I. GENERAL INFORMATION

**A. Background:** This instruction informs the A/B Medicare Administrative Contractors (MACs) Part A, the A/B MACs Part Home Health and Hospice (HHH) and the Fiscal Intermediary Shared System (FISS) that the I/OCE is being updated for April 1, 2021. The I/OCE routes all institutional outpatient claims (which includes Non-Outpatient Prospective Payment System [non-OPPS] hospital claims) through a single integrated OCE. The attached recurring update notification applies to publication 100-04, chapter 4, section 40.1.

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

#### II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Re	Responsibility							
			A/B	3 D		Shared-				Other
		N	MA(	$\mathbb{C}$	M	System				
			1		Е	Maintainers			ers	
		A	В	Н		F	M		C	
				Н		Ι	C			
				Н	A	~	S	S	F	
					C	S				
12187.1	The Shared System Maintainer shall install the					X				
	Integrated OCE (I/OCE) into their systems.									
12187.2	Medicare contractors shall identify the I/OCE	X		X		X				
	specifications on the CMS website at									
	https://www.cms.gov/Medicare/Coding/OutpatientCod									
	eEdit/OCEQtrReleaseSpecs.									

#### III. PROVIDER EDUCATION TABLE

Number	Requirement		spo	nsib	ility	•
		A/B D MAC M E				C E D
		A	В	H H H	M A C	Ι
12187.3	MLN Article: CMS will make available an MLN Matters provider education article that will be marketed through the MLN Connects weekly newsletter shortly after the CR is released. MACs shall follow IOM Pub. No. 100-09 Chapter 6, Section 50.2.4.1, instructions for distributing MLN Connects information to providers, posting the article or a direct link to the article on your website, and including the article or a direct link to the article in your bulletin or newsletter. You may supplement MLN Matters articles with localized information benefiting your provider community in billing and administering the Medicare program correctly. Subscribe to the "MLN Matters" listserv to get article release notifications, or review them in the MLN Connects weekly newsletter.	X		X		

#### IV. SUPPORTING INFORMATION

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

<sup>&</sup>quot;Should" denotes a recommendation.

X-Ref	Recommendations or other supporting information:
Requirement	
Number	

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

#### V. CONTACTS

**Pre-Implementation Contact(s):** Yvonne Young, Yvonne.Young@cms.hhs.gov, Marina Kushnirova, Marina.Kushnirova@cms.hhs.gov, Fred Rooke, Fred.Rooke@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: 2**

#### 2 Summary of Quarterly Release Modifications

The modifications of the IOCE for the April 1, 2021, v22.1 release is summarized in the table below. Readers should also read through the entire document and note the highlighted sections, which also indicate changes from the prior release of the software. Some IOCE modifications in the update may be retroactively added to prior releases. If so, the retroactive date appears in the 'Effective Date' column.

Item#	Type	Effective Date	Edits Affected	Modification
1.	Logic	04/01/2021	24	Modify the software to maintain 28 prior quarters (7 years) of programs in each release. Remove older versions with each release. The earliest date/version included for this release is 07/01/2014, v15.2 of the IOCE.
2.	Logic	07/01/2014	23	Update program logic for HH claims (32x) to exclude edit 23 from being returned on a line item(s) reporting the HIPPS code with revenue code 0023. See <a href="Home Health">Home Health</a> <a href="Home Health">Processing Logic</a> for more information.
3.	Logic	04/01/2021		Update program logic for FQHC claims (77x) for new opioid use disorder (OUD) treatment demonstration HCPCS code G2172. If HCPCS G2172 is reported, the Payment Indicator is set to 2, the Packaging Flag is set to 0, and edits 88 and 89 are bypassed if no FQHC payment code and/or qualifying visit code is present. See new logic section FQHC PPS - Opioid Use Disorder Treatment Demonstration for more information.
4.	Logic	01/01/2017		Update program logic to assign payment method flag 8 if clinic visit code G0463 is reported with modifier PN, regardless of when the payment adjustment flag value assignment is 4, 9, or 10. See <u>Criteria for Non-Excepted Services Reported with Modifier PN</u> for updated information.
5.	Logic	01/01/2016	93	Update program logic by removing edit 93 from being returned on the following bill type settings.  OPPS: 22x, 32x, 34x w and w/o APC covered services, 72x, 74x, 75x, 81x, 82x  Non-OPPS: 13x w/CC 41, 14x
6.	Logic	01/01/2016	<u>98</u>	Update program logic by Removing edit 98 from being returned on the following bill type settings.  OPPS: 22x, 32x, 34x w/o APC covered services, 43x, 71x, 72x, 74x, 75x, 77x, 81x, 87x
7.	Logic	01/01/2017	100	Update program logic by removing edit 100 from being returned on the following bill type settings.  OPPS: 22x, 32x, 34x w/o APC covered services, 43x, 71x, 72x, 74x, 75x, 77x, 81x, 87x  Non-OPPS: 13x with CC41, 14x
8.	Logic	01/01/2017	<u>101</u>	Update program logic by excluding Section 603 logic and edit 101 from applying to Bill Type 13x with Condition Code 89 (Hospital Outpatient with Opioid Treatment Program).
9.	Logic	04/01/2021	110	Revise the mid-quarter effective date of edit 110 (FDA) for the following HCPCS codes.  M0239, Q0239: effective date 11/09/2020  Note: The following codes are added to be effective within the October quarter in order to apply their mid-quarter effective dates.  0001A, 0002A, 91300: effective date 12/11/2020  0011A, 0012A, 91301: effective date 12/18/2020
10.	Logic	10/06/2020	<u>83</u>	Revise the termination date of mid-quarter edit 83 to 10/05/2020 for HCPCS code 87450, to allow for edit 83 to be returned on dates of service exceeding 10/06/2020
11.	Documentation	04/01/2021	92	Revised reference to device-dependent procedures to device-intensive procedures. This includes a revision to the description of edit 92. See <u>Device Intensive Procedure</u> <u>Editing and Processing</u> section for revision updates.
12.	Documentation	04/01/2021	<u>77</u>	Remove edit 77 as an applicable edit returned under bill type 12x (OPPS) from the IOCE Edits Applied by OPPS Hospital Bill Type Table [OPPS Flag = 1].
13.	Documentation	04/01/2021	<u>115</u>	Remove edit 115 as an applicable edit returned under Non-OPPS bill type 83x within the IOCE Edits Applied by Non-OPPS Hospital Bill Type Table [OPPS Flag =2]
14.	Documentation	04/01/2021	93, 100	Add edits 93 and 100 as applicable edits returned under Non-OPPS bill type 12x, 13x, 85x within the IOCE Edits Applied by Non-OPPS Hospital Bill Type Table [OPPS Flag =2]

Item#	Type	Effective Date	Edits Affected	Modification
15.	Content	04/01/2021		Make all Diagnosis, HCPCS, APC, SI and edit changes as specified by CMS. Updates were made to the following tables and lists:  MAP_ADDON_TYPE1  • Type I addon procedures (edit 106)  MAP_ADDON_TYPE2  • Type II addon procedures (edit 107)  MAP_CONFLICT_RHC  • RHC CG Modifier Bypass list (edit 104)  MAP_CAPC  • CAPC Complexity Adjusted Code Pairs  OFFSET_HCPCS  • Terminated Device Procedure offset  DATA_CAPC  • Comprehensive APC procedures (rank update)  DATA_HCPCS  • Device Procedure list  • Edit 92 Device Procedure Bypass list (edit 92) (retroactive change for 28300: 01/01/2019)  • Terminated Device Procedure list  • CAPC exclusion list  • Pass-Through Radiopharm HCPCS list  • Low and High Cost Skin Substitute list (edit 87) (retroactive changes)  • Vaccine administration (HHA, Hospice)  • FQHC Non-covered list  • FQHC Flu PPV  • FQHC preventive services list  • Deductible Coinsurance N/A  • Non-covered services lists (SI = E1, edit 9)  • Not recognized by Medicare (SI=E1, edit 28)  • Non-reportable for OPPS list (SI = B, edit 62)  • DMERC billable services only (SI=Y, edit 61)  • Coinsurance and Deductible Waiver eligible (CS modifier, edit 114)  • Female only procedure list (edit 8)
16.	Content	04/01/2021	<u>20, 40</u>	Implement version 27.1 of the NCCI (as modified for applicable outpatient institutional providers).
17.	Other	04/01/2021		Create 508-compliant versions of the Specifications, Summary of Data Changes and File Layout documents for publication on the CMS web site. Provide MF and PC IOCE software and supporting quarterly data file reports for publication on the CMS web site.
18.	Other	04/01/2021		Deliver quarterly software update and all related documentation and files to users via electronic download.

# Final Summary of Data Changes IOCE v22.1.0 April 2021

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### **APC Changes**

#### **Added APCs**

The following APC(s) were added.

#### Added APCs

APC	Eff Date	Description	Status Indicator	Payment
09397	2021-04-01	Covid-19 Vaccine Administration Dose 1 of 2	S	\$16.94
09398	2021-04-01	Covid-19 Vaccine Administration Dose 2 of 2 or Single Dose	S	\$28.39
		Product		
09406	2021-01-01	Inj, nyvepria	K	\$0.00
09406	2021-04-01	Inj, nyvepria	G	\$0.00
09407	2021-04-01	Injection, lumasiran	G	\$0.00

Final Summary of Data Changes v22.1

#### **Deleted APCs**

The following APC(s) were deleted.

#### **Deleted APCs**

APC	Eff Date	Description
09399	2021-01-01	MFN drug add-on, per dose

#### **Modified APC Descriptions**

The following APC(s) had a description change.

**Modified APC Descriptions** 

APC	Eff Date	Description Current	Description Previous
09346	2021-04-01	Mometasone sinus sinuva	Mometasone furoate (sinuva)
09383	2021-04-01	Copper cu 64 dotatate diag	Copper cu-64, dotatate, dx
09384	2021-04-01	Inj belantamab mafodont blmf	Belantamab mafodontin-blmf
09385	2021-04-01	Inj., tafasitamab-cxix	Injection, tafasitamab-cxix
09386	2021-04-01	Inj. viltolarsen	Injection, viltolarsen
09391	2021-04-01	Brexucabtagene car pos t	Brexucabtagene autoleucel ca
09392	2021-04-01	Inj. asceniv	Inj, imm glob asceniv

#### **Modified APC Status Indicators**

The following APC(s) had status indicator changes.

#### **Modified APC Status Indicators**

APC	Eff Date	Description	Status Indicator Current	Status Indicator Previous
09035	2021-04-01	Axicabtagene ciloleucel car+	K	G
09036	2021-04-01	Injection, renflexis	K	G
09174	2021-04-01	Inj, durolane 1 mg	K	G
09194	2021-04-01	Tisagenlecleucel car-pos t	K	G
09395	2021-04-01	Factor viia recomb sevenfact	G	K
09462	2021-04-01	Injection, delafloxacin	K	G
09463	2021-04-01	Inj., aprepitant, 1 mg	K	G
09466	2021-04-01	Inj., benralizumab, 1 mg	K	G
09467	2021-04-01	Inj rituximab, hyaluronidase	K	G
09468	2021-04-01	Factor ix recomb gly rebinyn	K	G
09469	2021-04-01	Inj triamcinolone ace xr 1mg	K	G

#### **HCPCS Procedure Code Changes**

#### **Added HCPCS Codes**

The following HCPCS code(s) were added.

Note: 0001A, 0002A, 0011A, 0012A, 91300, 91301 are being added to the October quarter to account for the codes mid-quarter effective dates.

#### **Added HCPCS Codes**

HCPCS	Eff Date	Description	Status Indicator	APC	Edit	Appr Date	Term Date
0001A	2020-10-01	Adm sarscov2 30mcg/0.3ml 1st	S	01492	110	2020-12-11	
0002A	2020-10-01	Adm sarscov2 30mcg/0.3ml 2nd	S	01493	110	2020-12-11	
0011A	2020-10-01	Adm sarscov2 100mcg/0.5ml1st	S	01492	110	2020-12-18	
0012A	2020-10-01	Adm sarscov2 100mcg/0.5ml2nd	S	01493	110	2020-12-18	
0242U	2021-04-01	Trgt gen seq alys pnl 55-74	A	00000			
0243U	2021-04-01	Ob pe biochem assay pgf alg	Q4	00000			
0244U	2021-04-01	Onc solid orgn dna 257 genes	A	00000			
0245U	2021-04-01	Onc thyr mut alys 10 gen&37	A	00000			
0246U	2021-04-01	Rbc dna gnotyp 16 bld groups	A	00000			
0247U	2021-04-01	Ob prtrm brth ibp4 shbg meas	Q4	00000			
91300	2020-10-01	Sarscov2 vac 30mcg/0.3ml im	L	00000	110	2020-12-11	
91301	2020-10-01	Sarscov2 vac 100mcg/0.5ml im	L	00000	110	2020-12-18	
A9592	2021-04-01	Copper cu 64 dotatate diag	G	09383			
C9074	2021-04-01	Injection, lumasiran	G	09407	55		
C9776	2021-04-01	Fluo bile duct imaging w/icg	N	00000	55		
C9777	2021-04-01	Esophag mucosal integ add-on	N	00000	55		
G2020	2021-04-01	Hi inten serv for SIP model	A	00000			
G2172	2021-04-01	Tx for opioid use demo proj	A	00000			
J1427	2021-04-01	Inj. viltolarsen	G	09386			
J1554	2021-04-01	Inj. asceniv	G	09392			
J7402	2021-04-01	Mometasone sinus sinuva	G	09346			
J9037	2021-04-01	Inj belantamab mafodont blmf	G	09384			
J9349	2021-04-01	Inj., tafasitamab-cxix	G	09385			
K1013	2021-04-01	Enema tube, any, replac only	Y	00000	61		
K1014	2021-04-01	Ak 4 bar link hydl swg/stanc	Y	00000	61		
K1015	2021-04-01	Foot, adductus position, adj	Y	00000	61		
K1016	2021-04-01	Trans elec nerv for trigemin	Y	00000	61		
K1017	2021-04-01	Monthly supp use with k1016	Y	00000	61		
K1018	2021-04-01	Ext up limb tremor stim wris	Y	00000	61		
K1019	2021-04-01	Monthly supp use with k1018	Y	00000	61		
K1020	2021-04-01	Non-invasive vagus nerv stim	Y	00000	61		
M0245	2021-01-01	Bamlan and etesev infusion	S	05694	110	2021-02-09	
Q0245	2021-01-01	Bamlanivimab and etesevima	L	00000	110	2021-02-09	
Q2053	2021-04-01	Brexucabtagene car pos t	G	09391			
S1091	2021-04-01	Stent non-coronary propel	E1	00000	9		

#### **Deleted HCPCS CPT Codes**

The following HCPCS code(s) were deleted.

#### **Deleted HCPCS CPT Codes**

HCPCS	Eff Date	Description
0098U	2021-04-01	Respir pathogen 14 targets
0099U	2021-04-01	Respir pathogen 20 targets
0100U	2021-04-01	Respir pathogen 21 targets
C9068	2021-04-01	Copper cu-64, dotatate, dx
C9069	2021-04-01	Belantamab mafodontin-blmf
C9070	2021-04-01	Injection, tafasitamab-cxix
C9071	2021-04-01	Injection, viltolarsen
C9072	2021-04-01	Inj, imm glob asceniv
C9073	2021-04-01	Brexucabtagene autoleucel ca
C9122	2021-04-01	Mometasone furoate (sinuva)
G2061	2021-01-01	Qual nonmd est pt 5-10m
G2062	2021-01-01	Qual nonmd est pt 11-20m
G2063	2021-01-01	Qual nonmd est pt 21>min
J7333	2021-04-01	Visco-3 inj dose
J7401	2021-04-01	Mometasone furoate sinus imp
K1010	2021-04-01	Intraurethral drainag device
K1011	2021-04-01	Acti intraurethral drainage
K1012	2021-04-01	Charger base station intraur

#### **Modified HCPCS Code Descriptions**

The following HCPCS code(s) had a description change. **Modified HCPCS Code Descriptions** 

HCPCS	Eff Date	Description Current	Description Previous
0021A	2021-04-01	Adm sarscov2 5x1010vp/.5ml 1	Fee covid-19 vac 3 dose 1
0022A	2021-04-01	Adm sarscov2 5x1010vp/.5ml 2	Fee covid-19 vac 3 dose 2
0031A	2021-04-01	Adm sarscov2 vac ad26 .5ml	Fee covid-19 vac 4 dose 1
91302	2021-04-01	Sarscov2 vac 5x1010vp/.5mlim	Coronavirus vaccine 3
91303	2021-04-01	Sarscov2 vac ad26 .5ml im	Coronavirus vaccine 4
G9868	2021-04-01	CMMI asyntelehealth <10min	Next gen aco model <10min
G9869	2021-04-01	CMMI asyntelehealth 10-20min	Next gen aco model 10-20min
G9870	2021-04-01	CMMI asyntelehealth >20min	Next gen aco model >20min
J7321	2021-04-01	Hyalgan supartz visco-3 dose	Hyalgan or supartz inj dose
M1145	2021-01-01	Mfn drug add-on, per dose	MFN drug add-on, per dose

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

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

**Note:** The following codes are being added in the October quarter of IOCE according to their revised mid-quarter effective date; note there are APC assignment changes effective 04/01/2021; 0001A, 0002A, 0011A, 0012A.

Modified HCPCS Code APC/Status Indicators/Edit Assignments

HCPCS Eff Date		ate Description		APC APC		Status	Edits	Edits
			Current	Previous	Indicator	Indicator	Current	Previou
					Current	Previous		S
0001A	2021-04-01	Adm sarscov2 30mcg/0.3ml 1st	09397	01492				
0002A	2021-04-01	Adm sarscov2 30mcg/0.3ml 2nd	09398	01493				
0011A	2021-04-01	Adm sarscov2 100mcg/0.5ml1st	09397	01492				
0012A	2021-04-01	Adm sarscov2 100mcg/0.5ml2nd	09398	01493				
0031A	2021-04-01	Adm sarscov2 vac ad26 .5ml	09398	00000	S	E1		9
0632T	2021-04-01	Perq tcat us abltj nrv p-art	05194	00000	J1	E1		9
81599	2021-01-01	Unlisted maaa			E1	A	28	
91303	2021-04-01	Sarscov2 vac ad26 .5ml im			L	E1		9
98970	2021-01-01	Qnhp ol dig assmt&mgmt 5-10			A	В		62
98971	2021-01-01	Qnhp ol dig assmt&mgmt 11-20			A	В		62
98972	2021-01-01	Qnhp ol dig assmt&mgmt 21+			A	В		62
C9462	2021-04-01	Injection, delafloxacin			K	G	55	55
G2010	2021-01-01	Remot image submit by pt			В	A	62	
G2012	2021-01-01	Brief check in by md/qhp			В	A	62	
G2211	2021-01-01	Complex e/m visit add on			В	N	62	
J0185	2021-04-01	Inj., aprepitant, 1 mg			K	G		
J0517	2021-04-01	Inj., benralizumab, 1 mg			K	G		
J3304	2021-04-01	Inj triamcinolone ace xr 1mg			K	G		
J7203	2021-04-01	Factor ix recomb gly rebinyn			K	G		
J7212	2021-04-01	Factor viia recomb sevenfact			G	K		
J7318	2021-04-01	Inj, durolane 1 mg			K	G		
J9311	2021-04-01	Inj rituximab, hyaluronidase			K	G		
M0239	2020-11-09	Bamlanivimab-xxxx infusion					110	110
M1145	2021-01-01	Mfn drug add-on, per dose	00000	09399	E1	K	9	
Q0239	2020-11-09	Bamlanivimab-xxxx					110	110
Q2041	2021-04-01	Axicabtagene ciloleucel car+			K	G		
Q2042	2021-04-01	Tisagenlecleucel car-pos t			K	G		
Q5104	2021-04-01	Injection, renflexis			K	G		
Q5122	2021-01-01	Inj, nyvepria	09406	00000	K	E2		13
Q5122	2021-04-01	Inj, nyvepria	09406	00000	G	E2		13

#### **Mid Quarter Edits Additions**

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

#### **Mid Quarter Edits Additions**

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

HCPCS	Eff Date	Description	Date	Edit	R*
0001A	2020-10-01	Adm sarscov2 30mcg/0.3ml 1st	2020-12-11	110	N
0001A	2021-01-01	Adm sarscov2 30mcg/0.3ml 1st	2020-12-11	110	A
0002A	2020-10-01	Adm sarscov2 30mcg/0.3ml 2nd	2020-12-11	110	N
0002A	2021-01-01	Adm sarscov2 30mcg/0.3ml 2nd	2020-12-11	110	A
0011A	2020-10-01	Adm sarscov2 100mcg/0.5ml1st	2020-12-18	110	N
0011A	2021-01-01	Adm sarscov2 100mcg/0.5ml1st	2020-12-18	110	A
0012A	2020-10-01	Adm sarscov2 100mcg/0.5ml2nd	2020-12-18	110	N
0012A	2021-01-01	Adm sarscov2 100mcg/0.5ml2nd	2020-12-18	110	A
91300	2020-10-01	Sarscov2 vac 30mcg/0.3ml im	2020-12-11	110	N
91300	2021-01-01	Sarscov2 vac 30mcg/0.3ml im	2020-12-11	110	A
91301	2020-10-01	Sarscov2 vac 100mcg/0.5ml im	2020-12-18	110	N
91301	2021-01-01	Sarscov2 vac 100mcg/0.5ml im	2020-12-18	110	A
M0245	2021-01-01	Bamlan and etesev infusion	2021-02-09	110	N
Q0245	2021-01-01	Bamlanivimab and etesevima	2021-02-09	110	N

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#### **Mid Quarter Edits Removals**

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

#### **Mid Quarter Edits Removals**

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

HCPCS	Eff Date	Description	R*
G2061	2021-01-01	Qual nonmd est pt 5-10m	D
G2062	2021-01-01	Qual nonmd est pt 11-20m	D
G2063	2021-01-01	Qual nonmd est pt 21>min	D

#### **Mid Quarter Edits Modified**

The following HCPCS code(s) had a modification to its Mid-Quarter edit or effective date.

**Mid Quarter Edits Modified** 

2.20 6.00.001 = 0.00 1.10 0.000							
HCPCS	Eff Date Description Mid Date Date		Date	Date	Date		
			Quarter	Approved	Approved	Terminated	Terminated
			Date Edit	Previous	Current	Previous	Current
87450	2020-10-01	Ag detect nos ia single	83			2020-10-06	2020-10-05
M0239	2020-10-01	Bamlanivimab-xxxx infusion	110	2020-11-10	2020-11-09		
Q0239	2020-10-01	Bamlanivimab-xxxx	110	2020-11-10	2020-11-09		

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#### **Female Only HCPCS Additions**

The following HCPCS code(s) were added to the list of female procedures.

## Female Only HCPCS Additions Reason Key: A=Added To List, N=New Code

HCPCS	Eff Date	Description	R*
0247U	2021-04-01	Ob prtrm brth ibp4 shbg meas	N

#### **Deductible Coinsurance Not Applicable Additions**

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

## Deductible Coinsurance Not Applicable Additions Reason Key: A=Added To List, N=New Code

HCPCS	Eff Date	Description	R*
0001A	2020-10-01	Adm sarscov2 30mcg/0.3ml 1st	N
0002A	2020-10-01	Adm sarscov2 30mcg/0.3ml 2nd	N
0011A	2020-10-01	Adm sarscov2 100mcg/0.5ml1st	N
0012A	2020-10-01	Adm sarscov2 100mcg/0.5ml2nd	N
0031A	2021-04-01	Adm sarscov2 vac ad26 .5ml	A
M0245	2021-01-01	Bamlan and etesev infusion	N

#### **Coinsurance And Deductible Waiver Eligible Additions**

The following HCPCS were added to the list of procedures eligible for a coinsurance and deductible waiver, if reported with modifier CS.

#### **Coinsurance And Deductible Waiver Eligible Additions**

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

HCPCS	Eff Date	Description	R*
98966	2020-01-01	Hc pro phone call 5-10 min	A
98967	2020-01-01	Hc pro phone call 11-20 min	A
98968	2020-01-01	Hc pro phone call 21-30 min	A
G2250	2021-01-01	Remot img sub by pt, non e/m	A
G2251	2021-01-01	Brief chkin, 5-10, non-e/m	A
G2252	2021-01-01	Brief chkin by md/qhp, 11-20	A

#### **Coinsurance And Deductible Waiver Eligible Removals**

The following HCPCS were removed from the list of procedures eligible for a coinsurance and deductible waiver, if reported with modifier CS.

#### **Coinsurance And Deductible Waiver Eligible Removals**

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

HCPCS	Eff Date	Description	R*
G2061	2021-01-01	Qual nonmd est pt 5-10m	D
G2062	2021-01-01	Qual nonmd est pt 11-20m	D
G2063	2021-01-01	Qual nonmd est pt 21>min	D

#### **Vaccine Administration Services Additions**

The following HCPCS were added to the vaccine administration services list that are paid by APC under OPPS for Home Health or Hospice claims

#### **Vaccine Administration Services Additions**

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

HCPCS	Eff Date	Description	R*
0001A	2020-10-01	Adm sarscov2 30mcg/0.3ml 1st	N
0002A	2020-10-01	Adm sarscov2 30mcg/0.3ml 2nd	N
0011A	2020-10-01	Adm sarscov2 100mcg/0.5ml1st	N
0012A	2020-10-01	Adm sarscov2 100mcg/0.5ml2nd	N
0031A	2021-04-01	Adm sarscov2 vac ad26 .5ml	A
M0245	2021-01-01	Bamlan and etesev infusion	N

#### **Comprehensive APC HCPCS Additions**

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

#### **Comprehensive APC HCPCS Additions**

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

HCPCS	Eff Date	Description	R*
0632T	2021-04-01	Perq tcat us abltj nrv p-art	A

#### **Complexity Adjusted Code Pair Additions**

The following Comprehensive APC code pairs were added for complexity adjustment.

## Complexity Adjusted Code Pair Additions Reason Key: A=Added To List, N=New Code

Code 1	Code 2	Complexity Adjusted Apc	Eff Date	R*
32408	20220	05073	2021-01-01	A
32408	49180	05073	2021-01-01	A

#### **Complexity Adjusted Code Pair Removals**

The following Comprehensive APC code pairs were removed for complexity adjustment.

## Complexity Adjusted Code Pair Removals Reason Key: R=Removed From List, D=Code Terminated

		,		
Code 1	Code 2	Complexity	Eff Date	R*
		Adjusted Apc		
20220	32408	05073	2021-01-01	R
49180	32408	05073	2021-01-01	R

#### **CAPC Exclusion Additions**

The following HCPCS were added to the CAPC Exclusion list.

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

HCPCS	Eff Date	Description	R*
0001A	2020-10-01	Adm sarscov2 30mcg/0.3ml 1st	N
0002A	2020-10-01	Adm sarscov2 30mcg/0.3ml 2nd	N
0011A	2020-10-01	Adm sarscov2 100mcg/0.5ml1st	N
0012A	2020-10-01	Adm sarscov2 100mcg/0.5ml2nd	N
0031A	2021-04-01	Adm sarscov2 vac ad26 .5ml	A
M0245	2021-01-01	Bamlan and etesev infusion	N

#### **FQHC Flu PPV Additions**

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

## FQHC Flu PPV Additions Reason Key: A=Added To List, N=New Code

HCPCS	Eff Date	Description	R*
0001A	2020-10-01	Adm sarscov2 30mcg/0.3ml 1st	N
0002A	2020-10-01	Adm sarscov2 30mcg/0.3ml 2nd	N
0011A	2020-10-01	Adm sarscov2 100mcg/0.5ml1st	N
0012A	2020-10-01	Adm sarscov2 100mcg/0.5ml2nd	N
0031A	2021-04-01	Adm sarscov2 vac ad26 .5ml	A
91300	2020-10-01	Sarscov2 vac 30mcg/0.3ml im	N
91301	2020-10-01	Sarscov2 vac 100mcg/0.5ml im	N
91303	2021-04-01	Sarscov2 vac ad26 .5ml im	A
M0245	2021-01-01	Bamlan and etesev infusion	N
Q0245	2021-01-01	Bamlanivimab and etesevima	N

#### **FQHC Non-Covered Additions**

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

## FQHC Non-Covered Additions Reason Key: A=Added To List, N=New Code

HCPCS	Eff Date	Description	R*
0242U	2021-04-01	Trgt gen seq alys pnl 55-74	N
0243U	2021-04-01	Ob pe biochem assay pgf alg	N
0244U	2021-04-01	Onc solid orgn dna 257 genes	N
0245U	2021-04-01	Onc thyr mut alys 10 gen&37	N
0246U	2021-04-01	Rbc dna gnotyp 16 bld groups	N
0247U	2021-04-01	Ob prtrm brth ibp4 shbg meas	N

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

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

## FQHC Non-Covered Removals Reason Key: R=Removed From List, D=Code Terminated

HCPCS	Eff Date	Description	R*
0098U	2021-04-01	Respir pathogen 14 targets	D
0099U	2021-04-01	Respir pathogen 20 targets	D
0100U	2021-04-01	Respir pathogen 21 targets	D

#### **FQHC Preventive Services Removals**

The following HCPCS were removed from the FQHC Preventive Services list.

## FQHC Preventive Services Removals Reason Key: R=Removed From List, D=Code Terminated

HCPCS	Eff Date	Description	R*
0001A	2021-01-01	Adm sarscov2 30mcg/0.3ml 1st	R
0002A	2021-01-01	Adm sarscov2 30mcg/0.3ml 2nd	R
0011A	2021-01-01	Adm sarscov2 100mcg/0.5ml1st	R
0012A	2021-01-01	Adm sarscov2 100mcg/0.5ml2nd	R
G0008	2014-10-01	Admin influenza virus vac	R
G0009	2014-10-01	Admin pneumococcal vaccine	R
M0239	2020-10-01	Bamlanivimab-xxxx infusion	R
M0243	2020-10-01	Casirivi and imdevi infusion	R

#### **RHC Modifier HCPCS Conflict Additions**

The following HCPCS modifier pairing for RHC conflict were added.

## RHC Modifier HCPCS Conflict Additions Reason Key: A=Added To List, N=New Code

HCPCS	Modifier	Eff Date	R*
G2172	CG		N

#### **RHC Modifier HCPCS Conflict Removals**

The following HCPCS-modifier pairing for RHC conflict were removed.

#### **RHC Modifier HCPCS Conflict**

#### Removals

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

Terminated

I CI IIIIIII	u		
HCPCS	Modifier	Eff Date	R*
10060	CG	2021-04-01	R
11721	CG	2021-04-01	R
11750	CG	2021-04-01	R
11765	CG	2021-04-01	R
12001	CG	2021-04-01	R
20600	CG	2021-04-01	R
20604	CG	2021-04-01	R
29580	CG	2021-04-01	R
69200	CG	2021-04-01	R
69210	CG	2021-04-01	R
90656	CG	2021-04-01	R

#### Pass-Through Radiopharm HCPCS Additions

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

## Pass-Through Radiopharm HCPCS Additions Reason Key: A=Added To List, N=New Code

HCPCS	Eff Date	Description	R*
A9592	2021-04-01	Copper cu 64 dotatate diag	N

#### Pass-Through Radiopharm HCPCS Removals

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

## Pass-Through Radiopharm HCPCS Removals Reason Key: R=Removed From List, D=Code Terminated

HCPCS	Eff Date	Description	R*
C9068	2021-04-01	Copper cu-64, dotatate, dx	D

#### **Skin Substitute High Cost Product Additions**

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

## Skin Substitute High Cost Product Additions Reason Key: A=Added To List, N=New Code

HCPCS	Eff Date	Description	R*
Q4167	2021-01-01	Truskin, per sq centimeter	A
Q4182	2021-01-01	Transcyte, per sq centimeter	A
Q4188	2021-01-01	Amnioarmor 1 sq cm	A
Q4190	2021-01-01	Artacent ac 1 sq cm	A
Q4193	2021-01-01	Coll-e-derm 1 sq cm	A
Q4198	2021-01-01	Genesis amnio membrane 1sqcm	A
Q4200	2021-01-01	Skin te 1 sq cm	A
Q4209	2021-01-01	Surgraft per sq cm	A
Q4211	2021-01-01	Amnion bio or axobio sq cm	A
Q4219	2021-01-01	Surgigraft dual per sq cm	A

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

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

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

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

HCPCS	Eff Date	Description	R*
Q4167	2021-01-01	Truskin, per sq centimeter	R
Q4182	2021-01-01	Transcyte, per sq centimeter	R
Q4188	2021-01-01	Amnioarmor 1 sq cm	R
Q4190	2021-01-01	Artacent ac 1 sq cm	R
Q4193	2021-01-01	Coll-e-derm 1 sq cm	R
Q4198	2021-01-01	Genesis amnio membrane 1sqcm	R
Q4200	2021-01-01	Skin te 1 sq cm	R
Q4209	2021-01-01	Surgraft per sq cm	R
Q4211	2021-01-01	Amnion bio or axobio sq cm	R
Q4219	2021-01-01	Surgigraft dual per sq cm	R

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#### **Device Procedure Additions**

The following HCPCS were added to the Device Procedure list.

#### Device Procedure Additions Reason Key: A=Added To List, N=New Code

HCPCS	Eff Date	Description	R*
0632T	2021-04-01	Pera tcat us ablti nrv n-art	A

#### **Device Procedure Edit 92 Bypass Additions**

The following HCPCS were added to the Device Procedure Bypass Edit 92 list.

## Device Procedure Edit 92 Bypass Additions Reason Key: A=Added To List, N=New Code

HCPCS	Eff Date	Description	R*
28300	2019-01-01	Incision of heel bone	A

#### **Terminated Device Procedure Additions**

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

#### **Terminated Device Procedure**

#### Additions

HCPCS	Eff Date	Amount
0632T	2021-04-01	\$4,979.84

#### **Type One Addon Procedure Code Additions**

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

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

Addon	Primary	Eff Date	R*
0599T	0598T	2021-01-01	A
0628T	0627T	2021-01-01	A
0630T	0629T	2021-01-01	A
33746	33745	2021-01-01	A
57465	57420	2021-01-01	A
57465	57421	2021-01-01	A
57465	57452	2021-01-01	A
57465	57454	2021-01-01	A
57465	57455	2021-01-01	A
57465	57456	2021-01-01	A
57465	57460	2021-01-01	A
57465	57461	2021-01-01	A
74425	50390	2021-01-01	A
74425	50396	2021-01-01	A
74425	50684	2021-01-01	A
74425	50690	2021-01-01	A
93662	93582	2021-01-01	A
93662	93583	2021-01-01	A
95940	92653	2021-01-01	A
95941	92653	2021-01-01	A
99417	99205	2021-01-01	A
99417	99215	2021-01-01	A
99439	99490	2021-01-01	A

#### **Type Two Addon Procedure Code Additions**

The following HCPCS were added to the Type Two Addon Procedure code list (edit 107).

#### **Type Two Addon Procedure**

#### **Code Additions**

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

Addon	Eff Date	R*
C9768	2020-10-01	A

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