

ICD-10 & Other Coding Revisions to National Coverage Determinations: October 2025 Update

Related CR Release Date: June 6, 2025	MLN Matters Number: MM14041
Effective Date: October 1, 2025	Related Change Request (CR) Number: <u>CR 14041</u>
Implementation Date: July 8, 2025 – BRs 14041.2 and 14041.4; October 6, 2025	Related CR Transmittal Number: R13251OTN

Related CR Title: International Classification of Diseases, 10th Revision (ICD-10) and Other Coding

Revisions to National Coverage Determinations (NCDs) – October 2025

Affected Providers

- Physicians
- Suppliers
- Other providers billing Medicare Administrative Contractors (MACs) for services

Action Needed

Make sure your billing staff knows about these updates effective October 1, 2025:

- New codes
- Recent coding changes

Background

CR 14041 is a maintenance update of ICD-10 conversions and other coding updates specific to National Coverage Determinations (NCDs). These NCD coding changes are the result of newly available codes, coding revisions to NCDs released separately, or coding feedback.

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MLN Matters: MM14041 Related CR 14041

Translations from ICD-9 to ICD-10 aren't consistent 1-to-1 matches, nor are all ICD-10 codes appearing in a complete General Equivalence Mappings guide or other mapping guides appropriate when reviewed against individual NCD policies.

Relevant NCD coding changes in CR 14041 affect:

- NCD 20.9.1 Ventricular assist devices
- NCD 110.24 Chimeric antigen receptor T-cell therapy
- NCD 190.11 Home prothrombin time/international normalized ratio monitoring for anticoagulation management
- NCD 210.4.1 Counseling to prevent tobacco use
- NCD 210.13 Screening for hepatitis C virus (HCV) in adults

Notes: NCD 110.24 has a new HCPCS code Q2058 effective July 1, 2025. This code describes a T-cell therapy obecabtagene autoleucel (obe-cel) treatment marketed as Aucatzyl®. HCPCS code C9301 describes this therapy for April 1, 2025 – June 30, 2025, dates of service.

For NCD 210.4.1, MACs are adding ICD-10-CM code Z72.0 effective October 1, 2024, to modify reason codes 59211, 59212, 59166, and 59167. This allows billing for HCPCS codes 99406 and 99407 with revenue code 0519 on Federally Qualified Health Center claims (type of bill (TOB) 77X).

For NCD 210.13, Clinical Laboratory Improvement Amendment-waived laboratories should bill claims using HCPCS code G0567 with modifier QW for HCV screening in adults effective retroactive to FDA approval date of June 27, 2024. However, we deny HCV screening claims billed with G0567 or HCPCS code G0472 if submitted on TOBs other than 13X, 14X, or 85X, as well as claims with line items featuring G0472 or G0567 that don't include place of service codes 11, 19, 22, 49, 71, and 81.

Previous NCD coding changes are available. Also, see the NCD spreadsheets for CR 14041.

We didn't include any policy changes in this ICD-10 quarterly update. We cover NCD policy changes using the current, longstanding NCD process.

Your MAC will adjust claims processed in error associated with CR 14041 that you bring to their attention.

More Information

We issued CR 14041 to your MAC as the official instruction for this change. For more information, find your MAC's website.

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Document History

Date of Change	Description
June 9, 2025	Initial article released.

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