CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 10824	Date: June 11, 2021
	Change Request 12295

SUBJECT: July 2021 Integrated Outpatient Code Editor (I/OCE) Specifications Version 22.2

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: July 1, 2021

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

IMPLEMENTATION DATE: July 6, 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

SUBJECT: July 2021 Integrated Outpatient Code Editor (I/OCE) Specifications Version 22.2

EFFECTIVE DATE: July 1, 2021

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

IMPLEMENTATION DATE: July 6, 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 July 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	espo	nsi	bilit	y			
					M System		Other		
					Е	Maintainers			
		A	В	H H H	M A C	_	M C S	V M S	
12295.1	The Shared System Maintainer shall install the Integrated OCE (I/OCE) into their systems.					X			
12295.2	Medicare contractors shall identify the I/OCE specifications on the CMS website at https://www.cms.gov/Medicare/Coding/OutpatientCodeEdit/OCEQtrReleaseSpecs.	X		X		X			

III. PROVIDER EDUCATION TABLE

Number	Requirement	Re	spo	nsib	ility	,
				M	C	
		A	В	H H H	E M A C	I
12295.3	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

[&]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.

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Final Summary of Data Changes

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APC Changes

Added APCs

The following APC(s) were added.

Added APCs

APC	Eff Date	Description	Status Indicator	Payment
02033	2021-07-01	Cath, trans intra litho/coro	H	\$0.00
09408	2021-07-01	Inj. naxitamab-gqgk, 1 mg	G	\$0.00
09409	2021-07-01	Gallium ga-68 psma-11 ucsf	G	\$0.00
09410	2021-07-01	Gallium ga-68 psma-11, ucla	G	\$0.00
09411	2021-07-01	Inj. riabni, 10 mg	G	\$0.00
09412	2021-07-01	Injection, casimersen, 10 mg	G	\$0.00
09413	2021-07-01	Lisocabtagene car pos t	G	\$0.00
09414	2021-07-01	Inj cabotegravir/rilpivirine	G	\$0.00
09415	2021-07-01	Inj, trilaciclib, 1 mg	G	\$0.00
09416	2021-07-01	Inj, evinacumab-dgnb, 5 mg	G	\$0.00
09417	2021-07-01	Inj, melphalan flufen, 1 mg	G	\$0.00
09418	2021-07-01	Inj. margetuximab-cmkb, 5 mg	G	\$0.00
09419	2021-07-01	Inj fensolvi 0.25 mg	K	\$0.00

Final Summary of Data Changes

Deleted APCs

The following APC(s) were deleted.

Deleted APCs

APC	Eff Date	Description
09373	2021-07-01	Inj onase abepar-xioi treat

Modified APC Descriptions

The following APC(s) had a description change.

Modified APC Descriptions

1.10 011110		0110010	
APC	Eff Date	Description Current	Description Previous
09132	2021-07-01	Prothrombin complex kcentra	Kcentra, per i.u.
09407	2021-07-01	Inj. lumasiran, 0.5 mg	Injection, lumasiran

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
09030	2021-07-01	Inj., copanlisib, 1 mg	K	G
09067	2021-07-01	Lutetium lu 177 dotatat ther	K	G
09070	2021-07-01	Inj luxturna 1 billion vec g	K	G
09073	2021-07-01	Buprenorph xr 100 mg or less	K	G
09239	2021-07-01	Buprenorphine xr over 100 mg	K	G
09257	2021-07-01	Inj., emicizumab-kxwh 0.5 mg	K	G

HCPCS Procedure Code Changes

Added HCPCS Codes

The following HCPCS code(s) were added.

Added HCPCS Codes

0248U 0249U 0250U	Eff Date 2021-07-01	Description	Status	APC	Edit	Appr Date	Term Date
0249U 0250U	2021-07-01		Indicator				
0250U		One brn sphrd ell 12 rx pnl	A	00000			
	2021-07-01	One brst alys 32 phsprtn alg	Q4	00000			
	2021-07-01	Onc sld org neo dna 505 gene	À	00000			
0251U	2021-07-01	Hepcidin-25 elisa serum/plsm	Q4	00000			
0252U	2021-07-01	Ftl aneuploidy str alys dna	À	00000			
0253U	2021-07-01	Rprdtve med rna gen prfl 238	A	00000			
0254U	2021-07-01	Reprdtve med alys 24 chrmsm	A	00000			
0640T	2021-07-01	Nente nr ifr spetrse wnd	M	00000	72		
0641T	2021-07-01	Nente nr ifr spetrse wnd img	T	05732			
0642T	2021-07-01	Nente nr ifr spetrse wnd i&r	M	00000	72		
0643T	2021-07-01	Tcat ventr rstrj dev implt	E1	00000	9		
0644T	2021-07-01	Tcat rmvl/dblk icar mas perq	J1	05192			
0645T	2021-07-01	Tcat impltj c sins rdctj dev	E1	00000	9		
0646T	2021-07-01	Ttvi/rplcmt w/prstc vlv perq	E1	00000	9		
0647T	2021-07-01	Insj gtube perq mag gastrpxy	Л1	05302			
0648T	2021-07-01	Quan mr alys tiss w/o mri	S	05523			
0649T	2021-07-01	Quan mr alys tiss w/mri	N	00000			
0650T	2021-07-01	Prgrmg dev eval scrms remote	Q1	05741			
0651T	2021-07-01	Mag ctrld capsule endoscopy	T	05301			
0652T	2021-07-01	Egd flx transnasal dx br/wa	T	05301			
0653T	2021-07-01	Egd flx transnasal bx 1/ml	T	05301			
0654T	2021-07-01	Egd flx transnasal tube/cath	J1	05302			
0655T	2021-07-01	Tprnl focal abltj mal prst8	J1	05374			
0656T	2021-07-01	Vrt bdy tethering ant	С	00000			
0657T	2021-07-01	Vrt bdy tethering ant 8+ seg	С	00000			
0658T	2021-07-01	Elec impd spectrsc 1+skn les	S	05733			
0659T	2021-07-01	Tcat intra-c nfs supersat o2	С	00000			
0660T	2021-07-01	Implt ant sgm io nbio rx sys	E1	00000	9		
0661T	2021-07-01	Rmvl&Rimpltj ant sgm implt	E1	00000	9		
0662T	2021-07-01	Scalp cool 1st meas&calbrj	S	05732			
0663T	2021-07-01	Scalp cool plmt mntr rmvl	N	00000			
0664T	2021-07-01	Don hysterectomy open cdvr	E1	00000	9		
0665T	2021-07-01	Don hysterectomy open liv	E1	00000	9		
0666T	2021-07-01	Don hysterectomy laps liv	E1	00000	9		
0667T	2021-07-01	Don hysterectomy rcp uter	E1	00000	9		
0668T	2021-07-01	Bkbench prep don uter algrft	E1	00000	9		
0669T	2021-07-01	Bkbench renstj don uter ven	E1	00000	9		
0670T	2021-07-01	Bkbench renstj don uter artl	E1	00000	9		
90626	2021-07-01	Tic-brn enceph vac 0.25ml im	E1	00000	9		
90627	2021-07-01	Tic-brn enceph vac 0.5ml im	E1	00000	9		
90671	2021-07-01	Pcv15 vaccine im	E1	00000	9		
90677	2021-07-01	Pcv20 vaccine im	E1	00000	9		
90758	2021-07-01	Zaire ebolavirus vac live im	E1	00000	9		
A9593	2021-07-01	Gallium ga-68 psma-11 ucsf	G	09409			
A9594	2021-07-01	Gallium ga-68 psma-11, ucla	G	09410			
C1761	2021-07-01	Cath, trans intra litho/coro	Н	02033	55		
C9075	2021-07-01	Injection, casimersen, 10 mg	G	09412	55		
C9076	2021-07-01	Lisocabtagene car pos t	G	09413	55		
C9077	2021-07-01	Inj cabotegravir/rilpivirine	G	09414	55		
C9078	2021-07-01	Inj, trilaciclib, 1 mg	G	09415	55		
C9079	2021-07-01	Inj, evinacumab-dgnb, 5 mg	G	09416	55		
C9080	2021-07-01	Inj, melphalan flufen, 1 mg	G	09417	55		
C9778	2021-07-01	Colpopexy, min/inv, ex-perit	J1	05414	55		
D0606	2021-01-01	Molecular test pub hlth path	E1	00000	9		
D1701	2021-01-01	Pfizer vacc admin 1st dose	E1	00000	9		
D1702	2021-01-01	Pfizer vacc admin 2nd dose	E1	00000	9		
D1703	2021-01-01	Moderna vacc admin 1st dose	E1	00000	9		
D1704	2021-01-01	Moderna vacc admin 2nd dose	E1	00000	9		
D1705	2021-01-01	AstraZeneca vacc adm 1st dos	E1	00000	9		
D1706	2021-01-01	AstraZeneca vacc adm 2nd dos	E1	00000	9		
D1707	2021-01-01	Janssen vaccine admin	E1	00000	9		
G0327	2021-07-01	Colon ca scrn;bld-bsd biomrk	A	00000			
J0224	2021-07-01	Inj. lumasiran, 0.5 mg	G	09407			
J1951	2021-07-01	Inj fensolvi 0.25 mg	K	09419			
J7168	2021-07-01	Prothrombin complex kcentra	K	09132			
J9348	2021-07-01	Inj. naxitamab-gqgk, 1 mg	G	09408			
J9353	2021-07-01	Inj. margetuximab-cmkb, 5 mg	G	09418			
	2021-04-01	Casirivi and imdevi infus hm	S	01509	110	2021-05-06	
M0244	2021-04-01	Bamlan and etesev infus home	S	01509	110	2021-05-06	

Final Summary of Data Changes

Added HCPCS Codes

HCPCS	Eff Date	Description	Status Indicator	APC	Edit	Appr Date	Term Date
Q5123	2021-07-01	Inj. riabni, 10 mg	G	09411			

Deleted HCPCS CPT Codes

The following HCPCS code(s) were deleted.

Deleted HCPCS CPT Codes

HCPCS	Eff Date	Description
C9074	2021-07-01	Injection, lumasiran
C9132	2021-07-01	Kcentra, per i.u.
M0239	2021-07-01	Bamlanivimab-xxxx infusion
Q0239	2021-07-01	Bamlanivimab-xxxx

Modified HCPCS Code Descriptions

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

HCPCS	Eff Date	Description Current	Description Previous			
0031A	2021-01-01	Adm sarscov2 vac ad26 .5ml	Fee covid-19 vac 4 dose 1			
0041A	2021-07-01	Adm sarscov2 5mcg/0.5ml 1st	Fee covid-19 vac 5 dose 1			
0042A	2021-07-01	Adm sarscov2 5mcg/0.5ml 2nd	Fee covid-19 vac 5 dose 2			
0493T	2021-07-01	Cntc near ifr spectrsc wound	Near ifr spectrsc of wounds			
91303	2021-01-01	Sarscov2 vac ad26 .5ml im	Coronavirus vaccine 4			
91304	2021-07-01	Sarscov2 vac 5mcg/0.5ml im	Coronavirus vaccine 5			

Modified HCPCS Code APC/Status Indicators/Edit Assignments

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

Modified HCPCS Code APC/Status Indicators/Edit Assignments

HCPCS	Eff Date	Description	APC	APC	Status Indicator	Status Indicator	Edits	Edits
		-	Current	Previous	Current	Previous	Current	Previous
0031A	2021-02-27	Adm sarscov2 vac ad26 .5ml	01493	00000	S	E1	110	9
21235	2020-01-01	Ear cartilage graft						12
22551	2021-07-01	Neck spine fuse&remov bel c2					12	
22552	2021-07-01	Addl neck spine fusion					12	
63650	2021-07-01	Implant neuroelectrodes					12	
63685	2021-07-01	Insrt/redo spine n generator					12	
63688	2021-07-01	Revise/remove neuroreceiver					12	
91303	2021-02-27	Sarscov2 vac ad26 .5ml im			L	E1	110	9
A9513	2021-07-01	Lutetium lu 177 dotatat ther			K	G		
J3398	2021-07-01	Inj luxturna 1 billion vec g			K	G		
13399	2021-07-01	Inj onase abepar-xioi treat	00000	09373	A	K		
J7170	2021-07-01	Inj., emicizumab-kxwh 0.5 mg			K	G		
J9057	2021-07-01	Inj., copanlisib, 1 mg			K	G		
M0239	2020-11-09	Bamlanivimab-xxxx infusion					69	110
M0243	2021-07-01	Casirivi and imdevi infusion	01506	05694				
M0245	2021-07-01	Bamlan and etesev infusion	01506	05694				
Q0239	2020-11-09	Bamlanivimab-xxxx					69	110
Q9991	2021-07-01	Buprenorph xr 100 mg or less			K	G		
Q9992	2021-07-01	Buprenorphine xr over 100 mg			K	G		

Mid Quarter Edits Additions

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

Mid Quarter Edits Additions

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

HCPCS	Eff Date	Description	Date	Edit	R*
0031A	2021-01-01	Adm sarscov2 vac ad26 .5ml	2021-02-27	110	A
91303	2021-01-01	Sarscov2 vac ad26 .5ml im	2021-02-27	110	A
M0244	2021-04-01	Casirivi and imdevi infus hm	2021-05-06	110	N
M0246	2021-04-01	Bamlan and etesev infus home	2021-05-06	110	N

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*
M0239	2021-07-01	Bamlanivimab-xxxx infusion	D
Q0239	2021-07-01	Bamlanivimab-xxxx	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

HCPCS	Eff Date	Description	Mid Quarter	Date	Date	Date	Date
			Date Edit	Approved	Approved	Terminated	Terminated
				Previous	Current	Previous	Current
0031A	2021-01-01	Adm sarscov2 vac ad26 .5ml	110		2021-02-27		
91303	2021-01-01	Sarscov2 vac ad26 .5ml im	110		2021-02-27		
M0239	2020-10-01	Bamlanivimab-xxxx infusion	69				2021-04-16
Q0239	2020-10-01	Bamlanivimab-xxxx	69				2021-04-16

Male Only HCPCS Additions

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

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

HCPCS	Eff Date	Description	R*
0655T	2021-07-01	Tprnl focal abltj mal prst8	N

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*
0243U	2021-04-01	Ob pe biochem assay pgf alg	A
0253U	2021-07-01	Rprdtve med rna gen prfl 238	N
0664T	2021-07-01	Don hysterectomy open cdvr	N
0665T	2021-07-01	Don hysterectomy open liv	N
0666T	2021-07-01	Don hysterectomy laps liv	N
0667T	2021-07-01	Don hysterectomy rcp uter	N
0668T	2021-07-01	Bkbench prep don uter algrft	N
0669T	2021-07-01	Bkbench renstj don uter ven	N
0670T	2021-07-01	Bkbench renstj don uter artl	N
C9778	2021-07-01	Colpopexy, min/inv, ex-perit	N

Conditional Bilateral Additions

The following HCPCS were added to the Conditional Bilateral list.

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

HCPCS	Eff Date	Description	R*
0660T	2021-07-01	Implt ant sgm io nbio rx sys	N
0661T	2021-07-01	Rmvl&Rimpltj ant sgm implt	N

Conditional Bilateral Removals

The following HCPCS were removed from the Conditional Bilateral list.

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

HCPCS	Eff Date	Description	R*
69706	2021-01-01	Nps surg dilat eust tube bi	R

Final Summary of Data Changes

Inherent Bilateral Additions

The following HCPCS were added to the Inherent Bilateral list.

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

ixcason ixcy.	Reason Rey. A-Added To Elst, 11-11cm Code						
HCPCS	Eff Date	Description	R*				
69706	2021-01-01	Nps surg dilat eust tube bi	A				

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*
0031A	2021-01-01	Adm sarscov2 vac ad26 .5ml	A
M0244	2021-04-01	Casirivi and imdevi infus hm	N
M0246	2021-04-01	Bamlan and etesev infus home	N

Deductible Coinsurance Not Applicable Removals

The following HCPCS were removed from the Deductible Coinsurance Not Applicable list.

Deductible Coinsurance Not Applicable Removals Reason Key: R=Removed From List, D=Code Terminated

HCPCS	Eff Date	Description	R*
G0117	2017-01-01	Glaucoma sern hgh risk direc	R
G0118	2017-01-01	Glaucoma sern hgh risk direc	R
G0404	2021-01-01	Ekg tracing for initial prev	R
M0239	2021-07-01	Bamlanivimab-xxxx infusion	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 claims.

Vaccine Administration Services Additions

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

HCPCS	Eff Date	Description	R*
0031A	2021-01-01	Adm sarscov2 vac ad26 .5ml	A
M0244	2021-04-01	Casirivi and imdevi infus hm	N
M0246	2021-04-01	Bamlan and etesev infus home	N

Vaccine Administration Services Removals

The following HCPCS were removed from the vaccine administration services list that are paid by APC under OPPS for Home Health claims.

Vaccine Administration Services Removals

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

HCPCS	Eff Date	Description	R*
M0239	2021-07-01	Bamlanivimab-xxxx infusion	D

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*
0644T	2021-07-01	Tcat rmvl/dblk icar mas perq	N
0647T	2021-07-01	Insj gtube perq mag gastrpxy	N
0654T	2021-07-01	Egd flx transnasal tube/cath	N
0655T	2021-07-01	Tprnl focal abltj mal prst8	N
C9778	2021-07-01	Colpopexy, min/inv, ex-perit	N

CAPC Exclusion Additions

The following HCPCS were added to the CAPC Exclusion list.

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

HCPCS	Eff Date	Description	R*
0031A	2021-01-01	Adm sarscov2 vac ad26 .5ml	A
G0327	2021-07-01	Colon ca scrn;bld-bsd biomrk	N
M0244	2021-04-01	Casirivi and imdevi infus hm	N
M0246	2021-04-01	Bamlan and etesev infus home	N

Final Summary of Data Changes

CAPC Exclusion Removals

The following HCPCS were removed from the CAPC Exclusion list.

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

HCPCS	Eff Date		R*
M0239	2021-07-01	Bamlanivimab-xxxx infusion	D

FQHC Flu PPV Additions

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

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

HCPCS	Eff Date	Description	R*
0031A	2021-01-01	Adm sarscov2 vac ad26 .5ml	A
91303	2021-01-01	Sarscov2 vac ad26 .5ml im	A

FQHC Flu PPV Removals

The following HCPCS were removed from the FQHC Flu PPV list.

FQHC Flu PPV Removals
Reason Key: R=Removed From List, D=Code Terminated

HCPCS	Eff Date	Description	R*
M0239	2021-07-01	Bamlanivimab-xxxx infusion	D
Q0239	2021-07-01	Bamlanivimab-xxxx	D

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*
0248U	2021-07-01	One brn sphrd ell 12 rx pnl	N
0249U	2021-07-01	One brst alys 32 phsprtn alg	N
0250U	2021-07-01	One sld org neo dna 505 gene	N
0251U	2021-07-01	Hepcidin-25 elisa serum/plsm	N
0252U	2021-07-01	Ftl aneuploidy str alys dna	N
0253U	2021-07-01	Rprdtve med rna gen prfl 238	N
0254U	2021-07-01	Reprdtve med alys 24 chrmsm	N
G0327	2021-07-01	Colon ca scrn;bld-bsd biomrk	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

u		
Modifier	Eff Date	R*
CG	2020-07-01	R
CG	2020-07-01	R
CG	2020-01-01	R
CG	2020-01-01	R
CG	2020-07-01	R
CG	2020-01-01	R
CG	2020-07-01	R
CG	2020-04-01	R
CG	2020-04-01	R
CG	2020-01-01	R
CG	2020-04-01	R
	Modifier CG	Modifier Eff Date CG 2020-07-01 CG 2020-07-01 CG 2020-01-01 CG 2020-01-01 CG 2020-07-01 CG 2020-01-01 CG 2020-01-01 CG 2020-07-01 CG 2020-04-01 CG 2020-04-01 CG 2020-04-01 CG 2020-01-01

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*
A9593	2021-07-01	Gallium ga-68 psma-11 ucsf	N
A9594	2021-07-01	Gallium ga-68 psma-11, ucla	N

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*
Q4201	2021-07-01	Matrion 1 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*
Q4201	2021-07-01	Matrion 1 sq cm	R

Final Summary of Data Changes

Device Additions

The following HCPCS were added to the Device list.

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

HCPCS	Eff Date	Description	R*
C1761	2021-07-01		N

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*
0644T	2021-07-01	Tcat rmvl/dblk icar mas perq	N
0647T	2021-07-01	Insj gtube perq mag gastrpxy	N
0652T	2021-07-01	gd flx transnasal dx br/wa	
0653T	2021-07-01	gd flx transnasal bx 1/ml	
0654T	2021-07-01	Egd flx transnasal tube/cath	N

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*
19281	2021-01-01	Perq device breast 1st imag	A
19283	2021-01-01	Perq dev breast 1st strtctc	A
19285	2021-01-01	Perq dev breast 1st us imag	A
21461	2019-01-01	Treat lower jaw fracture	A

Pass-Through Device HCPCS Additions

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

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

HCPCS	Eff Date	Description	R*
C1761	2021-07-01	Cath, trans intra litho/coro	N

Pass-Through Device Offset Procedure Additions

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

Pass-Through Device Offset Procedure Additions

Code1	Code2	Eff Date	Amount
C1761	92928	2021-07-01	\$0.00
C1761	C9600	2021-07-01	\$0.00

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
0644T	2021-07-01	\$1,536.62
0647T	2021-07-01	\$503.76
0652T	2021-07-01	\$250.98
0653T	2021-07-01	\$250.98
0654T	2021-07-01	\$503.76

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

Primary	Eff Date	R*		
C8921	2020-01-01	A		
C8922	2020-01-01	A		
C8923	2020-01-01	A		
C8924	2020-01-01	A		
C8928	2020-01-01	A		
C8929	2020-01-01	A		
C8930	2020-01-01	A		
	C8921 C8922 C8923 C8924 C8928 C8929	C8921 2020-01-01 C8922 2020-01-01 C8923 2020-01-01 C8924 2020-01-01 C8928 2020-01-01 C8929 2020-01-01		

Modifier Changes

Modifier Description Changes

The following modifier(s) had a description change.

Modifier Description Changes

Modifier	Eff Date	Description Current	Description Previous
CS	2020-01-01	Cost share waiver covid-19	Covid-19 testing related svc
G3	2014-10-01	Urr reading of 65 to 69.9	Urr reading of 65 to 69.9

Contractor Edit Bypass Changes

Contractor Edit Bypass Additions

The following Contractor Edit Bypass(s) were added.

Contractor Edit Bypass Additions

Edit	Eff Date
9	2014-10-01
29	2014-10-01
51	2014-10-01
104	2014-10-01
109	2014-10-01
117	2014-10-01

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2 Summary of Quarterly Release Modifications

The modifications of the IOCE for the July 1, 2021, v22.2 release is summarized in the table below. Readers should also read through the entire document and note the highlighted sections, which also indicate changes from the prior release of the software. Some IOCE modifications in the update may be retroactively added to prior releases. If so, the retroactive date appears in the 'Effective Date' column.

Item#	Type	Effective Date	Edits Affected	Modification
1.	Logic	07/01/2021	<u>24</u>	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 10/01/2014, v15.3 of the IOCE.
2.	Interface	07/01/2021		Implement/Revise the following input/output fields: IOCE Control Block table: CPRDateptr – Add new Claims Processing Receipt Date input field Sgptr – Revise the byte size to 75 for the Line item entries field Line item Input Information table: CB Payment Adjustment Flag 1 – Revise the field description CB Payment Adjustment Flag 2 – Add new input field APC Return Buffer table: Payment Adjustment Flag 1 – Revise the description Payment Adjustment Flag 2 – Add new output field
3.	Logic	10/01/2014	41	Revise the logic for edit 41 to validate revenue codes based on the date specified in the "Claims Processing Receipt Date" field, instead of the previously used claim "From date" and "Service date" fields. See Revenue Code Editing for more information on revenue code editing or IOCE Processing for reference to non-medical code set validation.
4.	Logic	10/01/2014	<u>119</u>	Add new edit 119 (Invalid claims processing receipt date) and return code 29 to be applied if the claims processing receipt date is invalid (malformed) or the date falls outside the date range of any version of the IOCE program.
5.	Logic	10/01/2014	118	Add new edit 118 (invalid bill type) to be applied if the bill type for the claim is not programmed for the IOCE. Edit 118 is an IOCE processing error condition that causes a claim to not be processed (Claim processed flag 1) and the component outputs a return code value of 18.
6.	Logic	07/01/2021	117	Add new edit 117 (Token charge less than \$1.01 billed by provider) to line item reject (LIR) a drug HCPCS line(s) that have final SI= K or G and charges are less than \$1.01 and at least \$0.01. Edit 117 is not applied if a line item action flag of 2, 3, or 4 is submitted on input to the drug line(s). See Special Processing for Drugs and Biologicals
7.	Logic	10/01/2014	1	Revise the logic for edit 1 to examine claims with From-Through dates spanning any quarter boundary (e.g., 09/29-10/01), in order to apply a bypass of edit 1 if the diagnosis reported does not exist in at least one of the two quarters. Diagnosis codes that exist/existed within the first quarter, on a spanning quarter boundary claim, have all other diagnosis code editing applied (e.g., edit 2, 3, 5, etc.). However, diagnosis codes that exist only within the second quarter bypass edit 1 as well as all other diagnosis code edits. This logic update is applied across all bill types for OPPS and Non-OPPS. See Diagnosis Code Validation for more information. See also the revision to the Home Health logic section.
8.	Logic	01/01/2016	51	Activate edit 51 to be applied on OPPS bill type 13x and Non-OPPS bill type 85x if HCPCS G0378 is reported more than once per claim. If subsequent lines of G0378 are reported, edit 51 is applied (RTP) and the units associated with the subsequent G0378 line are not evaluated for C-APC assignment. Note: If a LIAF of 2, 3, or 4 is present, the line is ignored from processing and edit 51 is not applied. See Observation Processing under C-APCs section for more information.
9.	Logic	10/01/2014		Add edits 9, 29, 51, 104, 109, and 117 to the list of edits that can be bypassed by the contractor using the contractor bypass logic.
10.	Logic	07/01/2021	<u>110</u>	Add mid-quarter edit 110 (initial marketing date) to the following HCPCS codes: 0031A, 91303 effective 02/27/2021 M0244, M0246 effective 05/06/2021
11.	Logic	07/01/2021	69	Add mid-quarter edit 69 (Service provided outside approval period) to the following HCPCS codes: M0239, Q0239 Approval date 11/09/2020 and Termination Date 04/16/2021 Note: Codes M0239 and Q0239 can be reported per its approval period 11/09/2020-04/16/2021. Effective 04/17/2021, edit 69 is applied and continues to be applied until 06/30/2021. Effective 07/01/2021 the code is deleted and subject to edit 6.
12.	Documentation	07/01/2021		Add new payment adjustment flag value 25 to be reserved for future use. See Payment adjustment flag value table for update.
13.	Documentation	07/01/2021		Removed the following logic sections that have fallen out of scope of the IOCE: EAM Composite APC Level I and Level II Assignment Criteria Nuclear Medicine Procedure Processing Modified the language for the following logic section which is not stated elsewhere or associated with a logic change: Hospice Processing Logic
14.	Content	07/01/2021		Revised the Descriptions of the following Modifiers: CS: Cost share waiver covid-19

Item #	Type	Effective Date	Edits Affected	Modification
				G3: Urr reading of 65 to 69.9 (Note: removed extra space, no changes otherwise made
				to the description of this modifier)
15.	Content	07/01/2021		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 OFFSET CODEPAIR
				Pass-through Device Offset Code Pairs
				MAP_OFFSET_HCPCS
				Terminated Device Procedure Offset
				DATA_CAPC
				C-APC Procedures (new C-APCS and re-rank)
				DATA_REVENUE
				Revised Revenue Code Effective Dates and Descriptions per NUBC
				MAP_CONFLICT_RHC
				RHC CG modifier list (retroactive changes)
				DATA_HCPCS
				Device Procedure list
				Edit 92 Device Procedure Bypass list (edit 92)
				Terminated Device Procedure list Device list
				Pass-Through Device list
				Pass-Through Radiopharm HCPCS list (edit 99)
				Low and High Cost Skin Substitute list
				CAPC exclusion list
				Vaccine administration (Home Health)
				FQHC Non-covered list
				FQHC Flu PPV
				RHC CG modifier list (edit 104, retroactive changes)
				Deductible Coinsurance N/A (retroactive changes)
				Non-covered services list (SI = E1, edit 9)
				Female and Male only procedure lists (edit 8)
				Questionable Services list (edit 12, additions and 1 retroactive removal)
				Service not billable to MAC (edit 72)
				Conditionally bilateral list
				Inherently bilateral list
				Data_Modifiers
				Revised Modifier Descriptions only
16.	Content	07/01/2021	<u>20, 40</u>	Implement version 27.2 of the NCCI (as modified for applicable outpatient
17.	Ot1	07/01/2021		institutional providers).
1/.	Other	07/01/2021		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	07/01/2021		Deliver quarterly software update and all related documentation and files to users via
10.	Other	0 //01/2021		electronic download.
			1	cicetronic download.