

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 13979	Date: September 29, 2026
	Change Request 14594

This Transmittal is no longer sensitive and is being re-communicated. This instruction may now be posted to the Internet.

Transmittal 13931 issued August 20, 2026, is being rescinded and replaced by Transmittal 13979, dated September 29, 2026, to update the attachments for final and add two additional business requirements. All other information remains the same.

SUBJECT: October 2026 Integrated Outpatient Code Editor (I/OCE) Specifications Version 27.3

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to provide 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: October 1, 2026

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

IMPLEMENTATION DATE: October 5, 2026

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: 13979	Date: September 29, 2026	Change Request: 14594
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II. 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 October 1, 2026. The I/OCE routes all institutional outpatient claims (which includes non-OPPS hospital claims) through a single integrated OCE.

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 <https://www.cms.gov/medicare/coding/outpatientcodeedit>.

III. BUSINESS REQUIREMENTS TABLE

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

Num ber	Requirement	Responsibility								
		A/B MAC			D M E M A C	Shared-System Maintainers				Ot her
		A	B	H H H		FI SS	M CS	V M S	C W F	
1459 4.1	The Shared System Maintainer shall install the I/OCE into their systems.					X				
1459 4.2	Medicare contractors shall identify the I/OCE specifications on the CMS website at https://www.cms.gov/Medicare/Coding/OutpatientCodeEdit/OCEQtrReleaseSpecs .	X		X		X				
1459 4.3	Medicare contractors shall activate new reason code W7192 to suspend as per the documentation and update the narrative. This is new I/OCE edit 192.	X				X				
1459 4.4	Contractors shall update reason code narratives as outlined in the I/OCE specifications documentation.	X				X				
1459 4.5	Contractors shall apply an appropriate payer-only modifier code(s) to claim lines when a new preventive service vaccine (Influenza, Pneumococcal, COVID-19, or COVID-19 monoclonal) drug code and/or its administration code are received via an update fee file(s) but have not been added as payable by the IOCE. Note: These are in red font in attachment 1.	X		X		X				
1459 4.6	Contractors shall be notified by the CMS for other circumstances to apply payer only modifier codes (“#0” thru “#9” and “#A” thru “#Z”) to claims at CMS discretion.	X		X						C M S
1459 4.7	Contractors shall re-activate reason code 32440.	X		X						
1459 4.8	Medicare contractors shall activate new reason code W7193 to suspend as per the documentation and update the narrative. This is new I/OCE edit 193.	X				X				

IV. PROVIDER EDUCATION

None

Impacted Contractors: None

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

VI. CONTACTS

Pre-Implementation Contact(s): Yvonne Young, 410-786-1886 or yvonne.young@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VII. 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: 3

1 Summary of Quarterly Release Modifications

The modifications of the IOCE for the **October 1, 2026, v27.3** release are summarized in the table below. Readers should also read through the entire document and note the highlighted sections, which 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	10/1/2026	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 01/01/2020, v21.0 of the IOCE.
				Logic Changes:
2.	Logic	7/1/2025	192	Added a new edit 192 (Multiple occurrences of the same Payer Value Code present; MAC to use a different Payer Only modifier on the line(s) that caused the claim to suspend which produces the next available Payer Value Code) to suspend a claim at the line level when the MAC duplicates the same Payer Value Code incorrectly based on the #modifier applied; the edit instructs the MAC to use the next available Payer Only modifier to trigger the next Payer Value Code on the suspended line to continue processing. See Contractor Bypass Automation Templates
3.	Logic	7/1/2025	193	Added a new edit 193 (HCPCS present with a Payer Only modifier for contractor bypass without MAC-provided Payer Value Code Z7 and Value Code amount) to suspend a claim at the line level when the MAC required Value Code Z7 is not present, or when the associated value code amount is blank or invalid (non-integer).
4.	Logic	1/1/2020	106	Logic Modification: Updated the logic to apply Edit 106 to all related add-on code lines when the required primary code is absent. See Add-On Code Editing
5.	Logic	1/1/2020		Logic Modification: Updated the logic for revenue code 0891 and 0892 to automatically exclude cellular therapy service lines from CAPC packaging. Additionally, the Edit 48 bypass flag is removed for revenue code 0891 to indicate HCPCS are now required.
6.	Logic	1/1/2020	98, 99	Logic Modification: Edit 98 and 99 logics are updated to be applied consistently for providing Payer Value Code and Payment Adjustment flag output in conditions where the OPPS procedure is not payable (e.g. due to an edit) when paired with the drug or device for either pass-through offset or non-opioid payment limitation. See Conditions for Pass-through Drug or Biological Payment Offsets or Payment Limitations , Non-Opioid Post-Surgical Pain Relief Drug Payment Limitation Processing , Pass-through Device Processing , and Non-Opioid Surgical Pain Relief Device Processing
7.	Logic	4/1/2025	113	Logic Modification: Update to exclude bill types 12x and 22x from the Unacceptable Pdx Exclusion Ignored list.
8.	Logic	1/1/2020		Logic Correction: Update to exclude ACP from CAPC packaging only if on the same date of service as the AWW on a CAPC claim. When ACP is reported on a different date of service than the AWW on a CAPC claim, ACP packages with SI = N. See Advance Care Planning .
9.	Logic	1/1/2020	88	Logic correction: Edit 88 logic is updated to evaluate each service reported on an FQHC claim and returns Edit 88 when any service meets the edit criteria, rather than bypassing all services when a single service qualifies for an Edit 88 bypass.
10.	Logic	10/1/2026	139	Logic Activated: New processing of telehealth services for FQHC and RHC clinics when reported with professional service modifiers 93 or 95. A new edit 139 (Telehealth service reported incorrectly with modifier 93 or 95) is added to return the claim to provider (RTP) at the line level when a HCPCS code is reported with modifiers 93 or 95 that is not on the CMS Telehealth list. See FQHC PPS Telehealth Services and RHC Telehealth Services . Note: Edit 139 has an effective date of 1/1/2026 for OPPS and CAH hospitals.
11.	Logic	10/1/2026		Logic Activated: Line Item Action Flag value of 7 (Preventive telehealth service with coinsurance and/or deductible waived) is added to identify preventive services from the FQHC Preventive list (Data_HCPCS table) that are also on the telehealth list and performed via telehealth for FQHC and RHC claims when reported with modifier 93 or 95, in order to receive a waiver of coinsurance and/or deductible. See APC Return Buffer , FQHC Telehealth Services , and RHC Telehealth Services .
12.	Logic	1/1/2020	127	Logic modification: Update to the logic for edit 127 to remove the overall bypass of the edit if CC W2 is present and to add a new list of revenue codes that are allowable when CC W2 is present. See Part B Hospital Inpatient Processing .
				Documentation Changes:
13.	Documentation	1/1/2020	113	Update to the reason for edit generation for Edit 113 in the Edit Descriptions and Reason for Edit Generation Table to include codes flagged as Unacceptable_PDX_Exclusion_Ignored in the Data_DX10 table as a reason Edit 113 returns.
14.	Documentation	1/1/2020	113	Update to remove bill types 12x and 22x from the list of acceptable bill types that bypass the Unacceptable Principal Diagnosis exclusion logic. See Unacceptable Diagnosis Code Editing
15.	Documentation	1/1/2020	126	Updates to Telehealth Claims Processing for CAHs and the reason for edit generation in the Edit Descriptions and Reason for Edit Generation Table to include Modifier G0 (Telestroke) in the list of modifiers for Edit 126.
16.	Documentation	7/1/2025	192	Updated the following sections to incorporate new Edit 192: Contractor Bypass Processing , Contractor Bypass Automation Templates , Claim Return Buffer Table , Edit Return Buffer Table , Edit Descriptions and Reason for Edit Generation Table , IOCE Edits Applied by OPPS Hospital Bill Type Table [OPPS Flag = 1] , and IOCE Edits Applied by Non-OPPS Hospital Bill Type Table [OPPS Flag = 2] .
17.	Documentation	7/1/2025	193	Updated the following sections to incorporate new Edit 193: Contractor Bypass Processing , Contractor Bypass Automation Templates , Claim Return Buffer Table , Edit Return Buffer Table , Edit Descriptions and Reason for Edit Generation Table , IOCE Edits Applied by OPPS Hospital Bill Type Table [OPPS Flag = 1] , and IOCE Edits Applied by Non-OPPS Hospital Bill Type Table [OPPS Flag = 2] .
18.	Documentation	10/1/2026		Update the Add-On Code Editing section to reflect changes to Edit 106 logic for paired add-on codes reported without an eligible primary procedure code.

Item #	Type	Effective Date	Edits Affected	Modification
19.	Documentation	7/1/2026	88	Update to the Criteria for FQHC Encounters/Visit Processing edit 88 bypass logic to clarify edit 88 bypass processing. Edit 88 logic evaluates all services reported on an FQHC claim and returns edit 88 when any service meets the edit criteria, rather than bypassing all services when a single service qualifies for an edit 88 bypass.
20.	Documentation	1/1/2020	127	Update to Part B Hospital Inpatient Processing to remove the overall bypass of edit 127 if CC W2 is present and to add a new list of revenue codes that are allowable when CC W2 is present
21.	Documentation	10/1/2026		Update to FQHC PPS – Care Coordination Services to include processing for Co-Management Payment under the ACCESS Model. See FQHC PPS - Care Coordination Services and Co-Management Payment .
22.	Documentation	10/1/2026	139	Implementation of updates to Claim Return Buffer , Edit Return Buffer , Edit Descriptions and Reason for Edit Generation Table for edit 139.
23.	Documentation	10/1/2026		Implementation of updates to FQHC PPS Telehealth Services and RHC Telehealth Services associated with the logic changes for reporting telehealth services with modifiers 93 or 95.
24.	Documentation	10/1/2026		Implementation: The APC Return Buffer is updated to include new LIAF 7 (Preventive telehealth service with coinsurance and/or deductible waived).
25.	Documentation	10/1/2026	140	Update to the Contractor Bypass Applicable column for Edit 140 in the Edit Descriptions and Reason for Edit Generation Table to indicate that the edit may be bypassed at the line level.
26.	Documentation	10/1/2026	139	Update to Telehealth Claims Processing for CAHs to specify edit 139 is bypassed if professional CAH service revenue codes (096x, 097x, 098x) are present on any claim line reporting telehealth modifier 93 or 95.
27.	Documentation	7/1/2025	141	Update to Contractor Bypass Automation Templates and Contractor Bypass and Mid-quarter HCPCS Conversion Editing to include information for the new Data_Midquarter_Conversions table. This table is added to support edit 141 for identifying HCPCS subject to mid-quarter SI and/or APC bypass or conversion.
28.	Documentation	10/1/2026		Update to Manifestation Code Editing to remove duplicate statement regarding which bill types are applicable for OPPTS and non-OPPTS.
29.	Documentation	1/1/2020		Update to General Comprehensive APC Assignment Rules and Criteria: V16.0- Current to specify cellular gene therapy products are excluded from CAPC packaging when reported with the appropriate revenue code.
30.	Documentation	1/1/2020	5	Update to the reason for edit generation in the Edit Descriptions and Reason for Edit Generation Table for edit 5 for additional clarity.
31.	Documentation	10/1/2026	98, 99	Update to the reason for edit generation in the Edit Descriptions and Reason for Edit Generation Table for edits 98 and 99 to specify the OPPTS procedure must be a payable OPPTS procedure.
32.	Documentation	1/1/2020	98, 99	Updates to documentation to indicate Edits 98 and 99 are to be applied consistently and continue to provide Payer Value Code output in conditions where the OPPTS procedure is not payable when paired with the drug or device for pass-through offset or non-opioid payment limitation. See Conditions for Pass-through Drug or Biological Payment Offsets or Payment Limitations , Non-Opioid Post-Surgical Pain Relief Drug Payment Limitation Processing , Pass-through Device Processing , and Non-Opioid Surgical Pain Relief Device Processing
33.	Documentation	1/1/2020		Update to the Payer Value Code value format to remove the decimal (nnnnnnnnnn). See Claim Return Buffer .
				Content Changes:
34.	Content	10/1/2026		Co-Management Payment HCPCS has been integrated into the Care Coordination Services logic. See FQHC PPS – Care Coordination Services and Co-Management Payment .
35.	Content	1/1/2026		Retroactive update to remove the following HCPCS codes from the Device Offset Code Pair Table: • C1747 • C1826 • C1827
36.	Content	8/5/2026	67	Add mid-quarter edit 67 (FDA approval) to the following HCPCS codes: • 90616: 8/5/2026
37.	Content	5/14/2026	68	Add mid-quarter edit 68 (NCD approval) to the following HCPCS codes: • A9521: 5/14/2026
38.	Content	7/1/2025		Update to DATA_CONTRACTOR_TEMPLATE table to include Payer Value Code.
39.	Content	1/1/2020	126	Edit 126 is updated to include Modifier G0 (Telestroke). For CAH's, bill type 085x, if a HCPCS code, not on the Telehealth list, is reported with modifiers 95, G0, GT, or GQ, the IOCE returns edit 126 (RTP). Note also the edit 126 description is updated. See Telehealth Claims Processing for CAHs and Edit Descriptions and Reason for Edit Generation Table .
40.	Content	1/1/2026	140	Update to Data_Edit_Bypass table for edit 140 to indicate the edit may be bypassed at the line level.
41.	Content	10/1/2026	1, 2	Update diagnosis code editing for validity and age, based on the FY 2027 ICD-10-CM code revisions to the Medicare Code Editor (MCE). Refer to the Summary of Data Changes for detailed changes.
42.	Content	10/1/2026	113	Update the diagnosis code editing for Unacceptable principal diagnosis list based on the FY 2027 ICD-10-CM code revision to the Medicare Code Editor (MCE) with any exclusions to that listing based on OPPTS coding requirements and guidelines. Note that any diagnosis code flagged as being an exclusion to the Unacceptable Principal Diagnosis list does not return edit 113. Refer to the Summary of Data Changes for detailed changes.
43.	Content	10/1/2026	29, 109	Update the Code First and Mental health diagnosis list based on the FY 2027 ICD-10-CM code revisions.
				Data Content Changes:
44.	Content	10/1/2026		Make all Diagnosis, HCPCS, APC, SI and edit changes as specified by CMS. Updates were made to the following tables and lists: DATA DX10

Item #	Type	Effective Date	Edits Affected	Modification
				• Diagnosis Age Conflict list (edit 2) • Diagnosis Code First list (edit 109) • Diagnosis Mental Health list (edit 29) • Unacceptable principal diagnosis list (edit 113) • Unacceptable principal diagnosis OPPS exclusion list (bypass edit 113) • Unacceptable principal diagnosis exclusion ignored (edit 113) DATA_APC • Added new APCs and modified APCs as applicable DATA_CONTRACTOR_TEMPLATE • Updated values for LIAF with correct implementation date • Updated applicable entries with associated Payer Value Code output DATA_EDIT_BYPASS • Modified edit 140 DATA_HCPCS • Add, delete and modify new HCPCS as applicable • Bypass Edit 72 FQHC RHC list (edit 72) • Conditional Bilateral List • Coinsurance/Deductible Not Applicable list • Comprehensive APC Procedures list • Comprehensive APC Exclusion list • Device Procedure Bypass Edit 92 list (edit 92) • FQHC Chronic Care Management list • FQHC Non-Covered list (edit 91) • Mid Quarter Edit list (edit 67) • Non-BLA Skin Substitute Product list (edit 140) • Non-covered list (edit 9) • Part B Billable Inpatient HCPCS (edit 127) • Pass-Through Device HCPCS list • Pass-Through Device Offset list DATA_MODIFIER • Update to telehealth modifier (edit 126) DATA_MIDQUARTER_CONVERSIONS • Update to mid-quarter HCPCS Conversions list (edit 141) DATA_REVENUE • Update to revenue code (edit 48) DSC_EDIT • Update to description file to add new edit 192 • Update to description file to add new edit 193 OFFSET_CODEPAIR • Updates to passthrough device offset code pairs list
45.	Content	10/1/2026	20, 40	Implement NCCI v32.3 updates for October 2026.
46.	Content	10/1/2026	106	Implement the Add-on code updates for October 2026.
47.	Data Table Structure	10/1/2026		DATA_MIDQUARTER_CONVERSIONS • Added Data_Midquarter_Conversions table to support Edit 141 for identifying HCPCS subject to mid-quarter SI and/or APC bypass or conversion. DSC_EDIT • Removed description column
48.	Other	10/1/2026		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.

Final

Summary of Data Changes

IOCE v27.3.0 October 2026

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Diagnosis Code Changes

Added ICD-10-CM Diagnosis Codes

The following ICD-10-CM Diagnosis code(s) were added.

Added ICD-10-CM Diagnosis Codes

Diagnosis	Eff Date	Description
C7831	2026-10-01	Secondary malignant neoplasm of larynx
C7832	2026-10-01	Secondary malignant neoplasm of pharynx
C7983	2026-10-01	Secondary malignant neoplasm of oral cavity
D6911	2026-10-01	Glanzmann thrombasthenia
D6919	2026-10-01	Other qualitative platelet defects
E89830	2026-10-01	Post bariatric hypoglycemia
E89838	2026-10-01	Other postprocedural hypoglycemia
F64A	2026-10-01	Gender identity disorder, in remission
I4200	2026-10-01	Dilated cardiomyopathy, unspecified
I4201	2026-10-01	Familial-genetic dilated cardiomyopathy
I4209	2026-10-01	Other dilated cardiomyopathy
I4281	2026-10-01	Arrhythmogenic cardiomyopathy
I4289	2026-10-01	Other cardiomyopathies not elsewhere classified
I4722	2026-10-01	Catecholaminergic polymorphic ventricular tachycardia [CPVT]
I4981	2026-10-01	Brugada syndrome
I4982	2026-10-01	Ventricular bigeminy
I4989	2026-10-01	Other specified cardiac arrhythmias not elsewhere classified
J34830	2026-10-01	Odontogenic sinusitis, maxillary sinus
J34831	2026-10-01	Odontogenic sinusitis, ethmoid sinus
J34832	2026-10-01	Odontogenic sinusitis, frontal sinus
J34833	2026-10-01	Odontogenic sinusitis, sphenoid sinus
J34839	2026-10-01	Odontogenic sinusitis, unspecified
J4B	2026-10-01	Pulmonary mycetoma
K31B	2026-10-01	Hypertrophic pyloric stenosis, in childhood
K6A01	2026-10-01	Prevesical abscess
K6A09	2026-10-01	Other pelvic abscess
K6A8	2026-10-01	Other diseases of the pelvis, not elsewhere classified
K740A	2026-10-01	Hepatic fibrosis, moderate fibrosis
K7683	2026-10-01	Intestinal failure-associated liver disease
L02237	2026-10-01	Carbuncle of flank
M043	2026-10-01	VEXAS syndrome
M67A01	2026-10-01	Plantar fasciitis, right foot
M67A02	2026-10-01	Plantar fasciitis, left foot
M67A09	2026-10-01	Plantar fasciitis, unspecified foot
M7220	2026-10-01	Plantar fascial fibromatosis, unspecified foot
M7221	2026-10-01	Plantar fascial fibromatosis, right foot
M7222	2026-10-01	Plantar fascial fibromatosis, left foot
M868X11	2026-10-01	Other osteomyelitis, right shoulder
M868X12	2026-10-01	Other osteomyelitis, left shoulder
M868X19	2026-10-01	Other osteomyelitis, unspecified shoulder
M868X21	2026-10-01	Other osteomyelitis, right upper arm
M868X22	2026-10-01	Other osteomyelitis, left upper arm
M868X29	2026-10-01	Other osteomyelitis, unspecified upper arm
M868X31	2026-10-01	Other osteomyelitis, right forearm
M868X32	2026-10-01	Other osteomyelitis, left forearm
M868X39	2026-10-01	Other osteomyelitis, unspecified forearm
M868X41	2026-10-01	Other osteomyelitis, right hand
M868X42	2026-10-01	Other osteomyelitis, left hand
M868X49	2026-10-01	Other osteomyelitis, unspecified hand
M868X51	2026-10-01	Other osteomyelitis, right thigh
M868X52	2026-10-01	Other osteomyelitis, left thigh
M868X59	2026-10-01	Other osteomyelitis, unspecified thigh
M868X61	2026-10-01	Other osteomyelitis, right lower leg
M868X62	2026-10-01	Other osteomyelitis, left lower leg
M868X69	2026-10-01	Other osteomyelitis, unspecified lower leg
M868X71	2026-10-01	Other osteomyelitis, right ankle and foot
M868X72	2026-10-01	Other osteomyelitis, left ankle and foot
M868X79	2026-10-01	Other osteomyelitis, unspecified ankle and foot
M868X80	2026-10-01	Other osteomyelitis, skull
M868X81	2026-10-01	Other osteomyelitis, face and sinuses
M868X89	2026-10-01	Other osteomyelitis, other site
N99860	2026-10-01	Intraoperative and postprocedural nipple ischemia
N99861	2026-10-01	Intraoperative and postprocedural nipple necrosis
O00121	2026-10-01	Right interstit ectopic pregnancy without uterin pregnancy
O00122	2026-10-01	Left interstit ectopic pregnancy without uterin pregnancy
O00129	2026-10-01	Unsp interstit ectopic pregnancy without uterin pregnancy
O00131	2026-10-01	Right interstit ectopic pregnancy with uterin pregnancy
O00132	2026-10-01	Left interstit ectopic pregnancy with intrauterine pregnancy
O00139	2026-10-01	Unsp interstit ectopic pregnancy with uterin pregnancy
O0031	2026-10-01	Cesarean scar ectopic pregnancy without uterin pregnancy
O0032	2026-10-01	Cesarean scar ectopic pregnancy with intrauterine pregnancy
O0041	2026-10-01	Cervical ectopic pregnancy without intrauterine pregnancy

Added ICD-10-CM Diagnosis Codes

Diagnosis	Eff Date	Description
O0042	2026-10-01	Cervical ectopic pregnancy with intrauterine pregnancy
O00511	2026-10-01	Right cornual ectopic pregnancy without uterin pregnancy
O00512	2026-10-01	Left cornual ectopic pregnancy without uterin pregnancy
O00519	2026-10-01	Unsp cornual ectopic pregnancy without uterin pregnancy
O00521	2026-10-01	Right cornual ectopic pregnancy with intrauterine pregnancy
O00522	2026-10-01	Left cornual ectopic pregnancy with intrauterine pregnancy
O00529	2026-10-01	Unspecified cornual ectopic pregnancy with uterin pregnancy
O3140X0	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,unsp tri,unsp
O3140X1	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,unsp tri,fts1
O3140X2	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,unsp tri,fts2
O3140X3	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,unsp tri,fts3
O3140X4	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,unsp tri,fts4
O3140X5	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,unsp tri,fts5
O3140X9	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,unsp tri,oth
O3141X0	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,1st tri,unsp
O3141X1	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,1st tri,fts1
O3141X2	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,1st tri,fts2
O3141X3	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,1st tri,fts3
O3141X4	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,1st tri,fts4
O3141X5	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,1st tri,fts5
O3141X9	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more, 1st tri, oth
O3142X0	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,2nd tri,unsp
O3142X1	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,2nd tri,fts1
O3142X2	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,2nd tri,fts2
O3142X3	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,2nd tri,fts3
O3142X4	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,2nd tri,fts4
O3142X5	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,2nd tri,fts5
O3142X9	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more, 2nd tri, oth
O3143X0	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,3rd tri,unsp
O3143X1	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,3rd tri,fts1
O3143X2	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,3rd tri,fts2
O3143X3	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,3rd tri,fts3
O3143X4	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,3rd tri,fts4
O3143X5	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,3rd tri,fts5
O3143X9	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more, 3rd tri, oth
Q87A	2026-10-01	Loeys-Dietz syndrome
QA171	2026-10-01	Lynch syndrome
QA1790	2026-10-01	Familial cancer syndrome with pathogenic BRCA1 mutation
QA1791	2026-10-01	Familial cancer syndrome with pathogenic BRCA2 mutation
QA1792	2026-10-01	Li Fraumeni syndrome
QA1798	2026-10-01	Other inherited neoplm predisposition synd of mult systems
R7872	2026-10-01	Abnormal gadolinium level in blood
T52811A	2026-10-01	Toxic effect of alkenes, accidental (unintentional), init
T52811D	2026-10-01	Toxic effect of alkenes, accidental (unintentional), subs
T52811S	2026-10-01	Toxic effect of alkenes, accidental (unintentional), sequela
T52812A	2026-10-01	Toxic effect of alkenes, self-harm, initial encounter
T52812D	2026-10-01	Toxic effect of alkenes, self-harm, subsequent encounter
T52812S	2026-10-01	Toxic effect of alkenes, intentional self-harm, sequela
T52813A	2026-10-01	Toxic effect of alkenes, assault, initial encounter
T52813D	2026-10-01	Toxic effect of alkenes, assault, subsequent encounter
T52813S	2026-10-01	Toxic effect of alkenes, assault, sequela
T52814A	2026-10-01	Toxic effect of alkenes, undetermined, initial encounter
T52814D	2026-10-01	Toxic effect of alkenes, undetermined, subsequent encounter
T52814S	2026-10-01	Toxic effect of alkenes, undetermined, sequela
T52821A	2026-10-01	Toxic effect of cycloparaffins, accidental, init
T52821D	2026-10-01	Toxic effect of cycloparaffins, accidental, subs
T52821S	2026-10-01	Toxic effect of cycloparaffins, accidental, sequela
T52822A	2026-10-01	Toxic effect of cycloparaffins, self-harm, initial encounter
T52822D	2026-10-01	Toxic effect of cycloparaffins, self-harm, subs
T52822S	2026-10-01	Toxic effect of cycloparaffins, self-harm, sequela
T52823A	2026-10-01	Toxic effect of cycloparaffins, assault, initial encounter
T52823D	2026-10-01	Toxic effect of cycloparaffins, assault, subs
T52823S	2026-10-01	Toxic effect of cycloparaffins, assault, sequela
T52824A	2026-10-01	Toxic effect of cycloparaffins, undetermined, init
T52824D	2026-10-01	Toxic effect of cycloparaffins, undetermined, subs
T52824S	2026-10-01	Toxic effect of cycloparaffins, undetermined, sequela
T52891A	2026-10-01	Toxic effect of other organic solvents, accidental, init
T52891D	2026-10-01	Toxic effect of other organic solvents, accidental, subs
T52891S	2026-10-01	Toxic effect of other organic solvents, accidental, sequela
T52892A	2026-10-01	Toxic effect of other organic solvents, self-harm, init
T52892D	2026-10-01	Toxic effect of other organic solvents, self-harm, subs
T52892S	2026-10-01	Toxic effect of other organic solvents, self-harm, sequela
T52893A	2026-10-01	Toxic effect of other organic solvents, assault, init
T52893D	2026-10-01	Toxic effect of other organic solvents, assault, subs
T52893S	2026-10-01	Toxic effect of other organic solvents, assault, sequela
T52894A	2026-10-01	Toxic effect of other organic solvents, undetermined, init
T52894D	2026-10-01	Toxic effect of other organic solvents, undetermined, subs
T52894S	2026-10-01	Toxic effect of other organic solvents, undet, sequela
T59821A	2026-10-01	Toxic effect of hexamethylene diisocyanate, acc, init
T59821D	2026-10-01	Toxic effect of hexamethylene diisocyanate, acc, subs

Added ICD-10-CM Diagnosis Codes

Diagnosis	Eff Date	Description
T59821S	2026-10-01	Toxic effect of hexamethylene diisocyanate, acc, sequela
T59822A	2026-10-01	Toxic effect of hexamethylene diisocyanate, self-harm, init
T59822D	2026-10-01	Toxic effect of hexamethylene diisocyanate, self-harm, subs
T59822S	2026-10-01	Toxic effect of hexamethylene diisocyanate, slf-hrm, sequela
T59823A	2026-10-01	Toxic effect of hexamethylene diisocyanate, assault, init
T59823D	2026-10-01	Toxic effect of hexamethylene diisocyanate, assault, subs
T59823S	2026-10-01	Toxic effect of hexamethylene diisocyanate, assault, sequela
T59824A	2026-10-01	Toxic effect of hexamethylene diisocyanate, undet, init
T59824D	2026-10-01	Toxic effect of hexamethylene diisocyanate, undet, subs
T59824S	2026-10-01	Toxic effect of hexamethylene diisocyanate, undet, sequela
T65851A	2026-10-01	Toxic effect of medetomidine, accidental, init
T65851D	2026-10-01	Toxic effect of medetomidine, accidental, subs
T65851S	2026-10-01	Toxic effect of medetomidine, accidental, sequela
T65852A	2026-10-01	Toxic effect of medetomidine, self-harm, initial encounter
T65852D	2026-10-01	Toxic effect of medetomidine, self-harm, subs
T65852S	2026-10-01	Toxic effect of medetomidine, intentional self-harm, sequela
T65853A	2026-10-01	Toxic effect of medetomidine, assault, initial encounter
T65853D	2026-10-01	Toxic effect of medetomidine, assault, subsequent encounter
T65853S	2026-10-01	Toxic effect of medetomidine, assault, sequela
T65854A	2026-10-01	Toxic effect of medetomidine, undetermined, init
T65854D	2026-10-01	Toxic effect of medetomidine, undetermined, subs
T65854S	2026-10-01	Toxic effect of medetomidine, undetermined, sequela
Z6818	2026-10-01	Body mass index [BMI] 18.4 or less, adult
Z6819	2026-10-01	Body mass index [BMI] 18.5-19.9, adult
Z77013	2026-10-01	Contact with and (suspected) exposure to gadolinium
Z7732	2026-10-01	Contact with and exposure to burn pits in war theater
Z7733	2026-10-01	Contact with and (suspected) exposure to Agent Orange
Z7740	2026-10-01	Contact with and exposure to unspecified blast overpressure
Z7741	2026-10-01	Contact with and exposure to low-level blast overpressure
Z7742	2026-10-01	Contact with and exposure to high-level blast overpressure
Z7749	2026-10-01	Contact with and exposure to other blast overpressure
Z8617	2026-10-01	Personal history of Clostridioides difficile infection
Z878901	2026-10-01	Personal history of social gender transition
Z878902	2026-10-01	Personal history of medical gender transition
Z878903	2026-10-01	Personal history of surgical gender transition
Z878904	2026-10-01	Personal history of intersex surgery
Z878909	2026-10-01	Personal history of unspecified gender transition
Z87893	2026-10-01	Personal history of gender detransition

Deleted ICD-10-CM Diagnosis Codes

The following ICD-10-CM Diagnosis code(s) were deleted.

Deleted ICD-10-CM Diagnosis Codes

Diagnosis	Eff Date	Description
D691	2026-10-01	Qualitative platelet defects
I420	2026-10-01	Dilated cardiomyopathy
I428	2026-10-01	Other cardiomyopathies
I498	2026-10-01	Other specified cardiac arrhythmias
M722	2026-10-01	Plantar fascial fibromatosis
M868X1	2026-10-01	Other osteomyelitis, shoulder
M868X2	2026-10-01	Other osteomyelitis, upper arm
M868X3	2026-10-01	Other osteomyelitis, forearm
M868X4	2026-10-01	Other osteomyelitis, hand
M868X5	2026-10-01	Other osteomyelitis, thigh
M868X6	2026-10-01	Other osteomyelitis, lower leg
M868X7	2026-10-01	Other osteomyelitis, ankle and foot
M868X8	2026-10-01	Other osteomyelitis, other site
S23420A	2026-10-01	Sprain of sternoclavicular (joint) (ligament), init encntr
S23420D	2026-10-01	Sprain of sternoclavicular (joint) (ligament), subs encntr
S23420S	2026-10-01	Sprain of sternoclavicular (joint) (ligament), sequela
T528X1A	2026-10-01	Toxic effect of organic solvents, accidental, init
T528X1D	2026-10-01	Toxic effect of organic solvents, accidental, subs
T528X1S	2026-10-01	Toxic effect of organic solvents, accidental, sequela
T528X2A	2026-10-01	Toxic effect of organic solvents, self-harm, init
T528X2D	2026-10-01	Toxic effect of organic solvents, self-harm, subs
T528X2S	2026-10-01	Toxic effect of organic solvents, self-harm, sequela
T528X3A	2026-10-01	Toxic effect of other organic solvents, assault, init encntr
T528X3D	2026-10-01	Toxic effect of other organic solvents, assault, subs encntr
T528X3S	2026-10-01	Toxic effect of other organic solvents, assault, sequela
T528X4A	2026-10-01	Toxic effect of oth organic solvents, undetermined, init
T528X4D	2026-10-01	Toxic effect of oth organic solvents, undetermined, subs
T528X4S	2026-10-01	Toxic effect of oth organic solvents, undetermined, sequela
Z681	2026-10-01	Body mass index [BMI] 19.9 or less, adult
Z87890	2026-10-01	Personal history of sex reassignment

Modified DX10 Code Descriptions

The following ICD-10 code(s) had a description change.

Modified DX10 Code Descriptions

Diagnosis	Eff Date	Description Current	Description Previous
L02232	2026-10-01	Carbuncle of back [any part, except buttock and flank]	Carbuncle of back [any part, except buttock]
L03312	2026-10-01	Cellulitis of back [any part except buttock and flank]	Cellulitis of back [any part except buttock]
L03322	2026-10-01	Acute lymphangitis of back	Acute lymphangitis of back [any part except buttock]
Z2914	2026-10-01	Encounter for prophylactic rabies immune globulin	Encounter for prophylactic rabies immune globin

Pediatric Diagnosis Additions

The following ICD-10 code(s) were added to the list of pediatric diagnoses.

Pediatric Diagnosis Additions

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

Diagnosis	Eff Date	Description	R*
K31B	2026-10-01	Hypertrophic pyloric stenosis, in childhood	N

Adult Only Diagnosis Additions

The following ICD-10 code(s) were added to the list of adult only diagnoses.

Adult Only Diagnosis Additions

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

Diagnosis	Eff Date	Description	R*
Z6818	2026-10-01	Body mass index [BMI] 18.4 or less, adult	N
Z6819	2026-10-01	Body mass index [BMI] 18.5-19.9, adult	N

Adult Only Diagnosis Removals

The following ICD-10 code(s) were removed from the list of adult only diagnoses.

Adult Only Diagnosis Removals

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

Diagnosis	Eff Date	Description	R*
Z681	2026-10-01	Body mass index [BMI] 19.9 or less, adult	D

Maternity Diagnosis Additions

The following ICD-10 code(s) were added to the list of maternity diagnoses.

Maternity Diagnosis Additions

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

Diagnosis	Eff Date	Description	R*
O00121	2026-10-01	Right interstit ectopic pregnancy without uterin pregnancy	N
O00122	2026-10-01	Left interstit ectopic pregnancy without uterin pregnancy	N
O00129	2026-10-01	Unsp interstit ectopic pregnancy without uterin pregnancy	N
O00131	2026-10-01	Right interstit ectopic pregnancy with uterin pregnancy	N
O00132	2026-10-01	Left interstit ectopic pregnancy with intrauterine pregnancy	N
O00139	2026-10-01	Unsp interstit ectopic pregnancy with uterin pregnancy	N
O0031	2026-10-01	Cesarean scar ectopic pregnancy without uterin pregnancy	N
O0032	2026-10-01	Cesarean scar ectopic pregnancy with intrauterine pregnancy	N
O0041	2026-10-01	Cervical ectopic pregnancy without intrauterine pregnancy	N
O0042	2026-10-01	Cervical ectopic pregnancy with intrauterine pregnancy	N
O00511	2026-10-01	Right cornual ectopic pregnancy without uterin pregnancy	N
O00512	2026-10-01	Left cornual ectopic pregnancy without uterin pregnancy	N
O00519	2026-10-01	Unsp cornual ectopic pregnancy without uterin pregnancy	N
O00521	2026-10-01	Right cornual ectopic pregnancy with intrauterine pregnancy	N
O00522	2026-10-01	Left cornual ectopic pregnancy with intrauterine pregnancy	N
O00529	2026-10-01	Unspecified cornual ectopic pregnancy with uterin pregnancy	N
O3140X0	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,unsp tri,unsp	N
O3140X1	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,unsp tri,fts1	N
O3140X2	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,unsp tri,fts2	N
O3140X3	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,unsp tri,fts3	N
O3140X4	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,unsp tri,fts4	N
O3140X5	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,unsp tri,fts5	N
O3140X9	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,unsp tri,oth	N
O3141X0	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,1st tri,unsp	N
O3141X1	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,1st tri,fts1	N
O3141X2	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,1st tri,fts2	N
O3141X3	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,1st tri,fts3	N
O3141X4	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,1st tri,fts4	N
O3141X5	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,1st tri,fts5	N
O3141X9	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more, 1st tri, oth	N
O3142X0	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,2nd tri,unsp	N
O3142X1	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,2nd tri,fts1	N
O3142X2	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,2nd tri,fts2	N
O3142X3	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,2nd tri,fts3	N
O3142X4	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,2nd tri,fts4	N
O3142X5	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,2nd tri,fts5	N
O3142X9	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more, 2nd tri, oth	N
O3143X0	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,3rd tri,unsp	N
O3143X1	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,3rd tri,fts1	N
O3143X2	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,3rd tri,fts2	N
O3143X3	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,3rd tri,fts3	N
O3143X4	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,3rd tri,fts4	N
O3143X5	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more,3rd tri,fts5	N
O3143X9	2026-10-01	Cont preg aft vanishing twin syn 1 fts or more, 3rd tri, oth	N

Mental Health Additions

The following ICD-10 code(s) were added to the Mental Health Diagnosis list (edit 29).

Mental Health Additions

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

Diagnosis	Eff Date	Description	R*
F64A	2026-10-01	Gender identity disorder, in remission	N

Unacceptable Principal Diagnosis Additions

The following ICD-10 code(s) were added to the Unacceptable Principal Diagnosis list (edit 113).

Unacceptable Principal Diagnosis Additions

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

Diagnosis	Eff Date	Description	R*
Z6818	2026-10-01	Body mass index [BMI] 18.4 or less, adult	N
Z6819	2026-10-01	Body mass index [BMI] 18.5-19.9, adult	N
Z77013	2026-10-01	Contact with and (suspected) exposure to gadolinium	N
Z7732	2026-10-01	Contact with and exposure to burn pits in war theater	N
Z7733	2026-10-01	Contact with and (suspected) exposure to Agent Orange	N
Z7740	2026-10-01	Contact with and exposure to unspecified blast overpressure	N
Z7741	2026-10-01	Contact with and exposure to low-level blast overpressure	N
Z7742	2026-10-01	Contact with and exposure to high-level blast overpressure	N
Z7749	2026-10-01	Contact with and exposure to other blast overpressure	N
Z8617	2026-10-01	Personal history of Clostridioides difficile infection	N
Z878901	2026-10-01	Personal history of social gender transition	N
Z878902	2026-10-01	Personal history of medical gender transition	N
Z878903	2026-10-01	Personal history of surgical gender transition	N
Z878904	2026-10-01	Personal history of intersex surgery	N
Z878909	2026-10-01	Personal history of unspecified gender transition	N
Z87893	2026-10-01	Personal history of gender detransition	N

Unacceptable Principal Diagnosis Removals

The following ICD-10 code(s) were removed from the Unacceptable Principal Diagnosis list (edit 113).

Unacceptable Principal Diagnosis Removals

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

Diagnosis	Eff Date	Description	R*
Z681	2026-10-01	Body mass index [BMI] 19.9 or less, adult	D

Unacceptable Principal Diagnosis (OPPS) Exclusion Additions

The following ICD-10 code(s) were added as OPPS exclusions from the Unacceptable Principal Diagnosis list (edit 113 exclusions).

Unacceptable Principal Diagnosis (OPPS) Exclusion Additions

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

Diagnosis	Eff Date	Description	R*
Z77013	2026-10-01	Contact with and (suspected) exposure to gadolinium	N
Z7732	2026-10-01	Contact with and exposure to burn pits in war theater	N
Z7733	2026-10-01	Contact with and (suspected) exposure to Agent Orange	N
Z7740	2026-10-01	Contact with and exposure to unspecified blast overpressure	N
Z7741	2026-10-01	Contact with and exposure to low-level blast overpressure	N
Z7742	2026-10-01	Contact with and exposure to high-level blast overpressure	N
Z7749	2026-10-01	Contact with and exposure to other blast overpressure	N

Unacceptable Principal Diagnosis (OPPS) Exclusion Ignored Additions

The following ICD-10 code(s) were added to the ignored OPPS exclusions list for the Unacceptable Principal Diagnosis list (edit 113) for hospice bill types 081x, 082s.

Unacceptable Principal Diagnosis (OPPS) Exclusion Ignored Additions

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

Diagnosis	Eff Date	Description	R*
Z77013	2026-10-01	Contact with and (suspected) exposure to gadolinium	N
Z7732	2026-10-01	Contact with and exposure to burn pits in war theater	N
Z7733	2026-10-01	Contact with and (suspected) exposure to Agent Orange	N
Z7740	2026-10-01	Contact with and exposure to unspecified blast overpressure	N
Z7741	2026-10-01	Contact with and exposure to low-level blast overpressure	N
Z7742	2026-10-01	Contact with and exposure to high-level blast overpressure	N
Z7749	2026-10-01	Contact with and exposure to other blast overpressure	N

APC Changes

Added APCs

The following APC(s) were added.

Added APCs

APC	Eff Date	Description	Status Indicator	Payment
00766	2026-04-01	Tc99m exametazime	K	\$927.71
00958	2026-10-01	Inj, eplontersen, 1 mg	G	\$0.00
00959	2026-10-01	Inj trabecte apotex, 0.01 mg	G	\$0.00
00960	2026-10-01	Inj, pivekimab sunirine pvzy	G	\$0.00
00962	2026-10-01	F 18 pylarify truvu, dx 1mci	G	\$0.00
00966	2026-10-01	Inj, daptomycin (endo) 1mg	K	\$0.00
00967	2026-10-01	Inj tivideno alfa-eknm 1	K	\$0.00
00968	2026-10-01	Inj pegzilarginase-nbln	K	\$0.00
00969	2026-10-01	Inj omidubicel-only, tx dose	K	\$0.00
00970	2026-10-01	Inj etoposide (avyxa), 1 mg	G	\$0.00
00971	2026-10-01	Inj fluorouracil (avyxa)10mg	G	\$0.00
00972	2026-10-01	Inj, trabectedin, 0.01 mg	K	\$0.00
00973	2026-10-01	Inj, filkri, 1 mcg	K	\$0.00
00974	2026-10-01	Inj, denosumab-desu, 1 mg	K	\$0.00
00975	2026-10-01	Inj. nufymco, 0.1 mg	K	\$0.00
00976	2026-10-01	Inj, armlupeg, 0.5 mg	K	\$0.00
00977	2026-10-01	Inj docetaxel (hospira) 1 mg	K	\$0.00
00978	2026-07-01	Inj denileuk difti-cxdl 1mcg	K	\$0.00
00979	2026-10-01	Inj, omlyclo, 5 mg	K	\$0.00
00980	2026-10-01	Inj, efbemalenograstim alfa-	K	\$0.00
01431	2026-10-01	Centruroides immune f(ab)	K	\$0.00
09188	2026-10-01	Inj crotalidae im f(ab')2 eq	K	\$0.00

Deleted APCs

The following APC(s) were deleted.

Deleted APCs

APC	Eff Date	Description
00701	2026-10-01	Sr89 strontium
00750	2026-10-01	Inj, nithiodote, 3mg / 125mg
00866	2026-10-01	Inj, sod thiosulfate (hope)
09020	2026-10-01	Argatroban nonesrd (accord)
09103	2026-10-01	Inj, fulvestrant (fresenius)
09127	2026-10-01	Inj pemetrexed (accord) 10mg
09247	2026-10-01	Inj, amisulpride, 1 mg
09260	2026-10-01	Ofatumumab injection
09305	2026-10-01	Inj., lumoxiti, 0.01 mg
09328	2026-10-01	Inj., yutiq, 0.01 mg
09480	2026-10-01	Injection trabectedin 0.1mg
09490	2026-10-01	Inj, bezlotoxumab, 10 mg

Modified APC Descriptions

The following APC(s) had a description change.

Modified APC Descriptions

APC	Eff Date	Description Current	Description Previous
00949	2026-10-01	lnj, denosumab-qbde, 1 mg	lnj, den (eno/xtr), bio, 1mg
02080	2026-10-01	Echg/stim nv ndls nonopi dev	Echgnc nv ndls nonopioid dev
09243	2026-10-01	lnj, bendamustine (nos) 1mg	lnj, bendamustine hcl, 1mg
09430	2026-10-01	Piflu f 18 pylarify dx 1 mci	Piflu f-18, dia 1 millicurie

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
00732	2026-10-01	Inj, brixadi, 7 days or less	K	G
00733	2026-10-01	Inj brixadi, more than 7 day	K	G
09246	2026-10-01	Inj, abilify asimtufii, 1 mg	K	G
09250	2026-10-01	Inj epcoritamab-bysp 0.16 mg	K	G
09254	2026-10-01	Flotufolastat fl8 diag 1 mci	K	G
09262	2026-10-01	Inj tofersen intrathec 1 mg	K	G
09266	2026-10-01	Inj, uzedy, 1 mg	K	G
09277	2026-10-01	Altuviiiio per factor viii iu	K	G

HCPCS Procedure Code Changes

Added HCPCS Codes

The following HCPCS code(s) were added.

Added HCPCS Codes

HCPCS	Eff Date	Description	Status Indicator	APC	Edit	Appr Date	Term Date
0660U	2026-10-01	Hpv gnotyp 18/31/33/35 cfdna	Q4	00000			
0661U	2026-10-01	Hpv genotype 16 cfdna ddpcr	Q4	00000			
0662U	2026-10-01	Trnsply med kar rtqpcr 12gen	A	00000			
0663U	2026-10-01	Ob fetal pllt ag nipt cfdna	E1	00000	9		
0664U	2026-10-01	Trnsply med kaf ngs 13 genes	A	00000			
0665U	2026-10-01	Hep mash elisa ykl40 rtqpcr	Q4	00000			
0666U	2026-10-01	Nfct ds wnd dna mult rtqpcr	Q4	00000			
0667U	2026-10-01	Iem pmd fgf21 conctrj elisa	Q4	00000			
0668U	2026-10-01	Onc pncrs dna 5hmc & glycan	A	00000			
0669U	2026-10-01	Nfct ds bbb species multdpcr	Q4	00000			
0670U	2026-10-01	Rare ds wgsa s/l read cmptrtr	A	00000			
0671U	2026-10-01	Rare ds wgsa s/l rd 2cmptrtrs	A	00000			
0672U	2026-10-01	Rare ds whole exome cmptrtr	A	00000			
0673U	2026-10-01	Rare ds whole exome 2cmptrtrs	A	00000			
0674U	2026-10-01	Rare ds mtdna bld/slv/gendna	A	00000			
0675U	2026-10-01	Rare ds mtdna prbnd&2cmptrtrs	A	00000			
0676U	2026-10-01	Rare ds wgsa maternal cmptrtr	E1	00000	9		
0677U	2026-10-01	Rare ds wgsa fetal sample	E1	00000	9		
0678U	2026-10-01	Onc hhm genome seq 117 genes	A	00000			
0679U	2026-10-01	Onc hhm dna alys >105 genes	A	00000			
0680U	2026-10-01	Tobac use dna alys 1mthyltn	A	00000			
0681U	2026-10-01	Tobac use dna alys 2mthyltn	A	00000			
0682U	2026-10-01	Onc lng ca dna alys 1mthyltn	A	00000			
0683U	2026-10-01	Onc lng ca dna alys 2mthyltn	A	00000			
0684U	2026-10-01	Aud 4mthyltn mrk pcr whl bld	A	00000			
0685U	2026-10-01	Aud 5mthyltn mrk pcr bld/slv	A	00000			
0686U	2026-10-01	Onc prst8 mma gene xprsn 22	A	00000			
0687U	2026-10-01	Cmptrtv alys str mrk dna bucc	E1	00000	9		
0688U	2026-10-01	Onc clret ca alys mrd ctdna	A	00000			
0689U	2026-10-01	Onc clrt ca alys mrd pt-spec	A	00000			
0690U	2026-10-01	Trnsply med ar dpcr alys 45	A	00000			
0691U	2026-10-01	Carrier screening gsap 6gens	E1	00000	9		
0692U	2026-10-01	Crd pad alys 3prtn ia plasma	Q4	00000			
0693U	2026-10-01	Onc h&n ctdna 699 genes vrnt	A	00000			
0694U	2026-10-01	Onc mg malditof ms isotypes	Q4	00000			
0695U	2026-10-01	Onc cns wgsa csf interrog	A	00000			
0696U	2026-10-01	Onc so tgsa ma alys 350/>	A	00000			
0697U	2026-10-01	Ob dna gnotyp alys <41 genes	A	00000			
0698U	2026-10-01	Neuro tbi alys gfap uch11	Q4	00000			
1054T	2026-10-01	Fcsd nshckwv us prop resd st	J1	05373			
1055T	2026-10-01	Ntraop rf abltj lumpctmy cav	N	00000			
1056T	2026-10-01	Cochlear infusion rx agent	J1	05163			
1057T	2026-10-01	Ins/rpl subq npg sprorb&ocpl	E1	00000	9		
1058T	2026-10-01	Revj subq sprorb&ocpl nstim	E1	00000	9		
1059T	2026-10-01	Rmvl subq sprorb&ocpl nstim	E1	00000	9		
1060T	2026-10-01	Elc aly sprorb-ocpl nstm cpx	E1	00000	9		
1061T	2026-10-01	Elc aly sprorb-ocpl nstm smp	E1	00000	9		
1062T	2026-10-01	Artif insem trnscrv ntratubl	T	05412			
1063T	2026-10-01	Onc bldr aug alg aly rec&prg	Q4	00000			
1064T	2026-10-01	Onc bldr augmnt alg alys beg	Q4	00000			
1065T	2026-10-01	Cysto co2 spray mnr bldr les	E1	00000	9		
1066T	2026-10-01	Cysto co2 spray sml bldr les	E1	00000	9		
1067T	2026-10-01	Cysto co2 spray med bldr les	E1	00000	9		
1068T	2026-10-01	Cysto co2 spray lrg bldr les	E1	00000	9		
1069T	2026-10-01	Mchnl xtr crycmprsn meas&edu	S	05735			
1070T	2026-10-01	Mchnl xtr crycmprsn plmt	S	05732			
1071T	2026-10-01	Mchnl xtr crycmprsn tx contn	N	00000			
1072T	2026-10-01	Lvr algrft nrmthrmc mntr ea	C	00000			
1073T	2026-10-01	Lvr algrft nrmthrmc dcannulj	C	00000			
1074T	2026-10-01	Lvr algrft hypthrm cannulj	C	00000			
1075T	2026-10-01	Lvr algrft hypthrm connj	C	00000			
1076T	2026-10-01	Lvr algrft hypthrm mntr 1st	C	00000			
1077T	2026-10-01	Lvr algrft hypthrm mntr ea	C	00000			
1078T	2026-10-01	Lvr algrft hypthrm dcannulj	C	00000			
1079T	2026-10-01	3d quan wtr bth us tong brst	E1	00000	9		
1080T	2026-10-01	Insj intracapsular magnifier	E1	00000	9		
1081T	2026-10-01	Mvasc anast lymph nod&vn 1st	J1	05092			
1082T	2026-10-01	Mvasc anast lymph node&vn ea	N	00000			
1083T	2026-10-01	Strctc plmt nfs cath brain	E1	00000	9		
1084T	2026-10-01	Impl scaf algrf sprchrdl spc	J1	05492			
1085T	2026-10-01	Asstv alg aly id les mets ca	S	05724			

Added HCPCS Codes

HCPCS	Eff Date	Description	Status Indicator	APC	Edit	Appr Date	Term Date
1086T	2026-10-01	Ntrapx est c ff aug alg alys	S	05724			
1087T	2026-10-01	Est c ff drv aug alg alys	S	05724			
1088T	2026-10-01	Perq appl hi-frq neuromd sgl	Q1	05721			
1089T	2026-10-01	Io quan mroelast tis charac	E1	00000	9		
1090T	2026-10-01	Atch&ins io lns prsth rx imp	E1	00000	9		
1091T	2026-10-01	Plmt perm com crtd art fltr	S	01576			
1092T	2026-10-01	Imp aclr scaf kne chndr open	J1	05114			
1093T	2026-10-01	Imp aclr scaf kne chndr arth	J1	05113			
1094T	2026-10-01	Imp aclr scaf knee each addl	N	00000			
1095T	2026-10-01	Hrv&pcx autol bmac mscskl tx	E1	00000	9		
1096T	2026-10-01	Nix thrmrg mltphas ssp dmyl8	E1	00000	9		
1097T	2026-10-01	Onc pncrs aug alg hmorph h&e	Q4	00000			
1098T	2026-10-01	Plmt subrta prosth w/vtrc	E1	00000	9		
1099T	2026-10-01	Abtlj ncemptnt vn ext tc hifu	E1	00000	9		
1100T	2026-10-01	Tc spi neuromd prgrmg ea 30	A	00000			
1101T	2026-10-01	Tc spi neuromd appl each 15	A	00000			
1102T	2026-10-01	Ntrop molec asmt lng tum tis	N	00000			
1103T	2026-10-01	Ntrop molec asmt ov tub/prtl	N	00000			
1104T	2026-10-01	N-invas cardpulm assmt cad	S	05734			
1105T	2026-10-01	Prsnlz nstm pls rate aug alg	E1	00000	9		
1106T	2026-10-01	Onc brst aug alg hmorph h&e	Q4	00000			
1107T	2026-10-01	Onc prst8 aug alg hmorph h&e	Q4	00000			
1108T	2026-10-01	Strtctc icere impl 1+1traj	E1	00000	9		
1109T	2026-10-01	Strtctc icere impl 1+mlt trj	E1	00000	9		
1110T	2026-10-01	Strtctc icere dlvr 1 traj	E1	00000	9		
1111T	2026-10-01	Strtctc icere dlvr mlt traj	E1	00000	9		
A2046	2026-10-01	Dermisphere hdr, per sq cm	S1	06001			
A2047	2026-10-01	Lacertamatrix, per sq cm	S1	06001			
A2048	2026-10-01	Puraply mz, per mg	N	00000			
A2049	2026-10-01	Theracor, per sq cm	S1	06001			
A2050	2026-10-01	Fibrillar collagen, per mg	N	00000			
A4228	2026-10-01	Dev-drug combo cath supplies	N	00000			
A6614	2026-10-01	Sup ext oculr neg pres pump	N	00000			
A9613	2026-10-01	F 18 pylarify truvu, dx 1mci	G	00962			
C9311	2026-10-01	Inj, eplontersen, 1 mg	G	00958	55		
C9312	2026-10-01	Inj trabecte apotex, 0.01 mg	G	00959	55		
C9313	2026-10-01	Inj, pivekimab sunirine pvzy	G	00960	55		
E0788	2026-10-01	Dev-drug combo infusion pump	Y	00000	61		
E2403	2026-10-01	Ext oculr neg pres pump	Y	00000	61		
G0577	2026-07-01	Vasc emb/occl organ, pgc	B	00000	62		
G0685	2026-10-01	Algorithm assessment for asd	S	05734			
J0014	2026-10-01	Cocaine hcl nasal (goprelto)	N	00000			
J0643	2026-10-01	Inj leucovorin calcium 1 mg	N	00000			
J0644	2026-10-01	Inj, leucovorin cal (avyxa)	G	00936			
J0871	2026-10-01	Inj, daptomycin (endo) 1mg	K	00966			
J1757	2026-10-01	Inj tividen alpha-eknm 1	K	00967			
J1818	2026-10-01	Inj pegzilarginase-nbln	K	00968			
J1946	2026-10-01	Inj, furose lasix onyu, 1 mg	E1	00000	9		
J1947	2026-10-01	Inj, furoscix, 1 mg	E1	00000	9		
J1957	2026-10-01	Injection levetiracetam 5 mg	N	00000			
J1958	2026-10-01	Inj levetirac sodi chlo 5 mg	N	00000			
J3268	2026-10-01	Injection, delafloxacin	E2	00000	13		
J3406	2026-10-01	Inj omidubicel-onlv, tx dose	K	00969			
J7524	2026-10-01	Mycophenol mofetil oral 5 mg	N	00000			
J7526	2026-10-01	Inj mycophenola mofetil 5 mg	N	00000			
J7529	2026-10-01	Mycop mofetil susp oral 5 mg	N	00000			
J7530	2026-10-01	Mycophenolat (myhibbin) 5 mg	N	00000			
J7531	2026-10-01	Pred sod pho ora dis ta 1 mg	E1	00000	9		
J9066	2026-10-01	Inj bendamustine, avyxa 1mg	E2	00000	13		
J9186	2026-10-01	Inj etoposide (avyxa), 1 mg	G	00970			
J9187	2026-10-01	Inj, etoposide, 1 mg	N	00000			
J9191	2026-10-01	Inj fluorouracil (avyxa)10mg	G	00971			
J9192	2026-10-01	Inj, fluorouracil, 10 mg	N	00000			
J9362	2026-10-01	Inj, trabectedin, 0.01 mg	K	00972			
L1330	2026-10-01	Sternocostal orthosis prefab	A	00000			
L1972	2026-10-01	Ankl foot ortho, prefab, off	A	00000			
L8697	2026-10-01	Ext phrenic stim acc repl ea	A	00000			
Q4207	2026-10-01	Carbon life, per sq cm	S1	06002			
Q4223	2026-10-01	Dermabind sl optic per sq cm	S1	06002			
Q4243	2026-10-01	Amchomatrix, per sq cm	S1	06002			
Q5172	2026-10-01	Inj, filkri, 1 mcg	K	00973			
Q5173	2026-10-01	Inj, denosumab-adet, 1 mg	E2	00000	13		

Deleted HCPCS CPT Codes

The following HCPCS code(s) were deleted.

Deleted HCPCS CPT Codes

HCPCS	Eff Date	Description
0556U	2026-10-01	Nfct ds p-s dna&rna 12 trgts
0557U	2026-10-01	Nfct ds bv dna mrk vag fluid
0585U	2026-10-01	Tgsap so neo cfdna 521 genes
C8010	2026-10-01	Pc plm pm c ctd emb prtc
C9046	2026-10-01	Cocaine hcl nasal (goprelto)
C9310	2026-10-01	Inj, leucovorin cal (avyxa)
C9462	2026-10-01	Injection, delafloxacin
J0640	2026-10-01	Leucovorin calcium injection
J1941	2026-10-01	Inj, furoscix, 20 mg
J1953	2026-10-01	Levetiracetam injection
J7514	2026-10-01	Mycophenol (myhibbin) 100 mg
J7517	2026-10-01	Mycophenolate mofetil oral
J7519	2026-10-01	Inj. mycophenolate mofetil
J7528	2026-10-01	Mycophen mofetil for susp
J9181	2026-10-01	Etoposide injection
J9190	2026-10-01	Fluorouracil injection
J9352	2026-10-01	Injection trabectedin 0.1mg
L8696	2026-10-01	Ext antenna phren nerve stim

Modified HCPCS Code Descriptions

The following HCPCS code(s) had a description change.

Modified HCPCS Code Descriptions

HCPCS	Eff Date	Description Current	Description Previous
0247U	2026-10-01	Ob preterm brth igfbp4 shbg	Ob prtrm brth ibp4 shbg meas
0591U	2026-10-01	Onc prst8 ca alys 3prtns srm	Onc prst8 ca 3prtns plsm srm
0894T	2026-10-01	Lvr algrft nrmthrmc cannulj	Cannulation liver allograft
0895T	2026-10-01	Lvr algrft nrmthrmc connj	Connj lvr algrft prfu dev 1
0896T	2026-10-01	Lvr algrft nrmthrmc mntr 1st	Connj lvr algrft prfu dev ea
A9595	2026-10-01	Piflu f 18 pylarify dx 1 mci	Piflu f-18, dia 1 millicurie
C9812	2026-10-01	Echg/stim nv ndls nonopi dev	Echgnc nv ndls nonopioid dev
J9033	2026-10-01	lnj, bendamustine (nos) 1mg	lnj, bendamustine hcl, 1mg
L1971	2026-10-01	Ankl foot ortho, customi fit	Afo w/ankle joint, prefab
L8030	2026-10-01	Breast prosth w/o adhes any	Breast prosthes w/o adhesive
L8031	2026-10-01	Breast prosth w adhes any	Breast prosthesis w adhesive
L8035	2026-10-01	Custom breast prosth any	Custom breast prosthesis

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 Current	APC Previous	Status Indicator Current	Status Indicator Previous	Edits Current	Edits Previous
0604T	2026-10-01	Rem oct rta dev setup&educat			B	E1	62	9
0605T	2026-10-01	Rem oct rta techl sprt min 8			B	E1	62	9
0606T	2026-10-01	Rem oct rta phys/qhp ea 30d			B	E1	62	9
1011T	2026-10-01	Pbm therapy of oral cavity	05735	00000	Q1	E1		9
90616	2026-08-05	Tirv vacc mrna 37.5/0.38 im			L	E1	67	9
90616	2026-10-01	Tirv vacc mrna 37.5/0.38 im			L	E1		9
99001	2026-10-01	Specimen handling pt-lab					9	28
A9521	2026-05-14	Tc99m exametazime	00766	00000	K	E1	68	9
A9521	2026-07-01	Tc99m exametazime	00766	00000	K	E1		9
A9600	2026-10-01	Sr89 strontium	00000	00701	E1	K	9	
A9608	2026-10-01	Flotufolastat fl18 diag 1 mci			K	G		
C9818	2026-01-01	Suzetrigine, orl, 1mg					55,50	55,50,141
E0150	2026-10-01	Combo walker-transport chair			Y	E1	61	9
J0184	2026-10-01	Inj, amisulpride, 1 mg	00000	09247	N	G		
J0209	2026-10-01	Inj, sod thiosulfate (hope)	00000	00866	E1	K	9	
J0211	2026-10-01	Inj, nithiodote, 3mg / 125mg	00000	00750	E1	K	9	
J0402	2026-10-01	Inj, abilify asimtuftii, 1 mg			K	G		
J0565	2026-10-01	Inj, bezlotoxumab, 10 mg	00000	09490	E1	K	9	
J0577	2026-10-01	Inj, brixadi, 7 days or less			K	G		
J0578	2026-10-01	Inj brixadi, more than 7 day			K	G		
J0716	2026-10-01	Centruroides immune f(ab)	01431	00000	K	E1		9
J0841	2026-10-01	Inj crotalidae im f(ab')2 eq	09188	00000	K	E1		9
J0891	2026-10-01	Argatroban nonesrd (accord)	00000	09020	E2	K	13	
J1304	2026-10-01	Inj tofersen intrathec 1 mg			K	G		
J1741	2026-01-01	Ibuprofen injection						141
J2374	2026-10-01	Apraclonidine hcl opht 0.1ml			N	E1		9
J2799	2026-10-01	Inj, uzedy, 1 mg			K	G		
J7214	2026-10-01	Altuviiiio per factor viii iu			K	G		
J7314	2026-10-01	Inj., yutiq, 0.01 mg	00000	09328	E1	K	9	
J9161	2026-07-01	Inj denileuk difti-cxdl 1mcg	00978	00000	K	E2		13
J9232	2026-10-01	Inj docetaxel (hospira) 1 mg	00977	00000	K	E2		13
J9296	2026-10-01	Inj pemetrexed (accord) 10mg	00000	09127	E2	K	13	
J9302	2026-10-01	Ofatumumab injection	00000	09260	E1	K	9	
J9313	2026-10-01	Inj., lumoxiti, 0.01 mg	00000	09305	E1	K	9	
J9321	2026-10-01	Inj epcoritamab-bysp 0.16 mg			K	G		
J9361	2026-10-01	Inj, efbemalenograstim alfa-	00980	00000	K	E2		13
J9394	2026-10-01	Inj, fulvestrant (fresenius)	00000	09103	E2	K	13	
K1007	2026-01-01	Bil hkaf pc s/d micro sensor			A	Y		61
Q5154	2026-10-01	Inj, omlyclo, 5 mg	00979	00000	K	E2		13
Q5166	2026-10-01	Inj, denosumab-desu, 1 mg	00974	00000	K	E2		13
Q5168	2026-10-01	Inj. nufymco, 0.1 mg	00975	00000	K	E2		13
Q5169	2026-10-01	Inj, armlupeg, 0.5 mg	00976	00000	K	E2		13

Mid Quarter Edits Additions

The following HCPCS code(s) were added to Mid-Quarter edit 67, 68, 69, 83, 110, or 134.

Mid Quarter Edits Additions

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

HCPCS	Eff Date	Description	Date	Edit	R*
90616	2026-07-01	Tirv vacc mrna 37.5/0.38 im	2026-08-05	67	A
A9521	2026-04-01	Tc99m exametazime	2026-05-14	68	A

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 Edit	Date Approved Previous	Date Approved Current	Date Terminated Previous	Date Terminated Current
90616	2026-07-01	Tirv vacc mna 37.5/0.38 im	67		2026-08-05		
A9521	2026-04-01	Tc99m exametazime	68		2026-05-14		
C9818	2026-01-01	Suzetrigine, orl, 1mg	0	2026-01-23		2026-03-31	
J1741	2026-01-01	Ibuprofen injection	0	2026-03-11		2026-03-31	

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*
46505	2026-07-01	Chemodenervation anal musc	R

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*
0555T	2024-01-01	B1 str&fx rsk transmis data	A
0556T	2024-01-01	B1 str & fx rsk assessment	A
0558T	2024-01-01	Ct scan f/biomchn ct alys	A

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*
1054T	2026-10-01	Fcsd nshckwv us prop resd st	N
1056T	2026-10-01	Cochlear infusion rx agent	N
1081T	2026-10-01	Mvasc anast lymph nod&vn lst	N
1084T	2026-10-01	Impl scaf algrf sprchrdl spc	N
1092T	2026-10-01	Imp aclr scaf kne chndr open	N
1093T	2026-10-01	Imp aclr scaf kne chndr arth	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*
0555T	2024-01-01	B1 str&fx rsk transmis data	A
0556T	2024-01-01	B1 str & fx rsk assessment	A
0558T	2024-01-01	Ct scan f/biomchn ct alys	A
1091T	2026-10-01	Plmt perm com crtd art fltr	N

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	Description	R*
C8010	2026-10-01	Pc plm pm c ctd emb prtc	D

FQHC Chronic Care Additions

The following HCPCS were added to the FQHC Chronic Care list.

FQHC Chronic Care Additions

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

HCPCS	Eff Date	Description	R*
G0676	2026-10-01	Std co-mgmt-eckm, ckm	A
G0677	2026-10-01	Std co-mgmt-msk	A
G0678	2026-10-01	Std co-mgmt-bh	A

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*
0660U	2026-10-01	Hpv gnotyp 18/31/33/35 cfdna	N
0661U	2026-10-01	Hpv genotype 16 cfdna ddpcr	N
0662U	2026-10-01	Trnsplj med kar rtqpcr 12gen	N
0663U	2026-10-01	Ob fetal plltlt ag nipt cfdna	N
0664U	2026-10-01	Trnsplj med kaf ngs 13 genes	N
0665U	2026-10-01	Hep mash elisa ykl40 rtqpcr	N
0666U	2026-10-01	Nfct ds wnd dna mult rtqpcr	N
0667U	2026-10-01	Iem pmd fgf21 conctrj elisa	N
0668U	2026-10-01	Onc pncrs dna 5hmc & glycan	N
0669U	2026-10-01	Nfct ds bbb species multdpcr	N
0670U	2026-10-01	Rare ds wgsa s/l read cmprtr	N
0671U	2026-10-01	Rare ds wgsa s/l rd 2cmprtrs	N
0672U	2026-10-01	Rare ds whole exome cmprtr	N
0673U	2026-10-01	Rare ds whole exome 2cmprtrs	N
0674U	2026-10-01	Rare ds mtdna bld/slv/gendna	N
0675U	2026-10-01	Rare ds mtdna prbnd&2cmprtrs	N
0676U	2026-10-01	Rare ds wgsa maternal cmprtr	N
0677U	2026-10-01	Rare ds wgsa fetal sample	N
0678U	2026-10-01	Onc hhm genome seq 117 genes	N
0679U	2026-10-01	Onc hhm dna alys >105 genes	N
0680U	2026-10-01	Tobac use dna alys 1mthyltn	N
0681U	2026-10-01	Tobac use dna alys 2mthyltn	N
0682U	2026-10-01	Onc lng ca dna alys 1mthyltn	N
0683U	2026-10-01	Onc lng ca dna alys 2mthyltn	N
0684U	2026-10-01	Aud 4mthyltn mrk pcr whl bld	N
0685U	2026-10-01	Aud 5mthyltn mrk pcr bld/slv	N
0686U	2026-10-01	Onc prst8 mrna gene xprsn 22	N
0687U	2026-10-01	Cmprtv alys str mrk dna bucc	N
0688U	2026-10-01	Onc clrct ca alys mrd ctdna	N
0689U	2026-10-01	Onc clrt ca alys mrd pt-spec	N
0690U	2026-10-01	Trnsplj med ar dpcr alys 45	N
0691U	2026-10-01	Carrier screening gsap 6gens	N
0692U	2026-10-01	Crđ pad alys 3prtñ ia plasma	N
0693U	2026-10-01	Onc h&n ctdna 699 genes vmt	N
0694U	2026-10-01	Onc mg malditof ms isotypes	N
0695U	2026-10-01	Onc cns wgsa csf interrog	N
0696U	2026-10-01	Onc so tgsa rna alys 350/>	N
0697U	2026-10-01	Ob dna gnotyp alys <41 genes	N
0698U	2026-10-01	Neuro tbi alys gfap uchl1	N

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*
0556U	2026-10-01	Nfct ds p-s dna&rna 12 trgts	D
0557U	2026-10-01	Nfct ds bv dna mrk vag fluid	D
0585U	2026-10-01	Tgsap so neo cfdna 521 genes	D

Bypass Edit 72 FQHC RHC Additions

The following HCPCS were added to the Bypass Edit 72 FQHC RHC list.

Bypass Edit 72 FQHC RHC Additions

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

HCPCS	Eff Date	Description	R*
G0676	2026-10-01	Std co-mgmt-eckm, ckm	A
G0677	2026-10-01	Std co-mgmt-msk	A
G0678	2026-10-01	Std co-mgmt-bh	A

Non-BLA Skin Substitute Product Additions

The following HCPCS were added to the non-BLA skin substitute product list not to be reported with modifiers JW or JZ (edit 140).

Non-BLA Skin Substitute Product Additions

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

HCPCS	Eff Date	Description	R*
A2046	2026-10-01	Dermisphere hprt, per sq cm	N
A2047	2026-10-01	Lacertamatrix, per sq cm	N
A2048	2026-10-01	Puraply mz, per mg	N
A2049	2026-10-01	Theracor, per sq cm	N
A2050	2026-10-01	Fibrillar collagen, per mg	N
Q4207	2026-10-01	Carbon life, per sq cm	N
Q4223	2026-10-01	Dermabind sl optic per sq cm	N
Q4243	2026-10-01	Amchomatrix, per sq cm	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*
1084T	2026-10-01	Impl scaf algrf sprchrdl spc	N
1091T	2026-10-01	Plmt perm com crtd art fltr	N
1092T	2026-10-01	Imp aclr scaf kne chndr open	N
1093T	2026-10-01	Imp aclr scaf kne chndr arth	N

Device Procedure Removals

The following HCPCS were removed from the Device Procedure list.

Device Procedure Removals

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

HCPCS	Eff Date	Description	R*
C8010	2026-10-01	Pc plm pm c ctd emb prtc	D

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*
1084T	2026-10-01	Impl scaf algrf sprchrdl spc	N
1091T	2026-10-01	Plmt perm com crtd art fltr	N
1092T	2026-10-01	Imp aclr scaf kne chndr open	N
1093T	2026-10-01	Imp aclr scaf kne chndr arth	N
27412	2026-01-01	Autochondrocyte implant knee	A
27415	2026-01-01	Osteochondral knee allograft	A
C8010	2026-04-01	Pc plm pm c ctd emb prtc	A

Device Removals

The following HCPCS were removed from the Device list.

Device Removals

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

HCPCS	Eff Date	Description	R*
C1747	2026-01-01	Endo, single, urinary tract	R
C1826	2026-01-01	Gen, neuro, clo loop, rechg	R
C1827	2026-01-01	Gen, neuro, imp led, ex cntr	R

Pass-Through Device HCPCS Removals

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

Pass-Through Device HCPCS Removals

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

HCPCS	Eff Date	Description	R*
C1747	2026-01-01	Endo, single, urinary tract	R
C1826	2026-01-01	Gen, neuro, clo loop, rechg	R
C1827	2026-01-01	Gen, neuro, imp led, ex cntr	R

Pass-Through Device Offset Procedure Removals

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

Pass-Through Device Offset Procedure Removals

Code1	Code2	Eff Date	Amount
C1747	50080	2026-01-01	\$1,166.07
C1747	50081	2026-01-01	\$1,157.74
C1747	50575	2026-01-01	\$893.70
C1747	50951	2026-01-01	\$301.78
C1747	50953	2026-01-01	\$328.34
C1747	50955	2026-01-01	\$397.03
C1747	50957	2026-01-01	\$312.64
C1747	50961	2026-01-01	\$547.51
C1747	50970	2026-01-01	\$192.45
C1747	50972	2026-01-01	\$0.00
C1747	50974	2026-01-01	\$700.01
C1747	50976	2026-01-01	\$347.21
C1747	50980	2026-01-01	\$330.44
C1747	52344	2026-01-01	\$629.09
C1747	52345	2026-01-01	\$678.41
C1747	52346	2026-01-01	\$575.97
C1747	52351	2026-01-01	\$213.15
C1747	52352	2026-01-01	\$362.83
C1747	52353	2026-01-01	\$339.08
C1747	52354	2026-01-01	\$477.35
C1747	52355	2026-01-01	\$412.28
C1747	52356	2026-01-01	\$570.89
C1747	C9761	2026-01-01	\$1,853.13
C1826	63685	2026-01-01	\$24,607.42
C1827	64568	2026-01-01	\$26,432.79

Terminated Device Procedure Removals

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

Terminated Device Procedure Removals

HCPCS	Eff Date	Amount
C8010	2026-10-01	\$5,425.16

Part B Billable Inpatient HCPCS Deletions

The following HCPCS were removed from the Part B Hospital Inpatient HCPCS Code list.

Part B Billable Inpatient HCPCS Deletions

HCPCS	Eff Date	Description	R*
J7517	2026-10-01	Mycophenolate mofetil oral	D

Modifier Changes

Telehealth Modifier Additions

The following modifier(s) were added as applicable for Telehealth reporting (edit 126).

Telehealth Modifier Additions

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

Modifier	Eff Date	Description	R*
G0	2020-01-01	Telestroke	A

Revenue Code Changes

Bypass Edit 48 Revenue Code Removals

The following Revenue Code(s) were removed from the Bypass Edit 48 list.

Bypass Edit 48 Revenue Code Removals

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

Revenue Code	Eff Date	Description	R*
0891	2020-01-01	Pharmacy - Extension of 025x and 063x - Special Processed Drugs - FDA Approved Cell Therapy	R

Not Allowable Revenue Code Additions

The following Revenue Code(s) were added to be reported for Part B Inpatient Claims when CC W2 is present (Edit 127).

Not Allowable Revenue Code Additions

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

Revenue Code	Eff Date	Description	R*
0391	2020-01-01	Administration, Processing, and Storage for Blood and Blood Components - Administration (E.G. Transfusions)	A
0392	2020-01-01	Administration, Processing, and Storage for Blood and Blood Components - Processing and Storage	A
0634	2020-01-01	Pharmacy - Extension of 025x - Erythropoietin (EPO) <10,000 Units	A
0635	2020-01-01	Pharmacy - Extension of 025x - Erythropoietin (EPO) >=10,000 Units	A
0636	2020-01-01	Pharmacy - Extension of 025x - Drugs Requiring Detailed Coding	A
0760	2020-01-01	Specialty Services - General Classification	A
0761	2020-01-01	Specialty Services - Treatment Room	A
0769	2020-01-01	Specialty Services - Other Specialty Services	A
0900	2020-01-01	Behavioral Health Treatment/Services (Also See 091x, An Extension of 090x) - General Classification	A
0901	2020-01-01	Behavioral Health Treatment/Services (Also See 091x, An Extension of 090x) - Electroshock Treatment	A
0902	2020-01-01	Behavioral Health Treatment/Services (Also See 091x, An Extension of 090x) - Milieu Therapy	A
0903	2020-01-01	Behavioral Health Treatment/Services (Also See 091x, An Extension of 090x) - Play Therapy	A
0904	2020-01-01	Behavioral Health Treatment/Services (Also See 091x, An Extension of 090x) - Activity Therapy	A
0911	2020-01-01	Behavioral Health Treatment/Services - Extension of 090x - Rehabilitation	A
0914	2020-01-01	Behavioral Health Treatment/Services - Extension of 090x - Individual Therapy	A
0915	2020-01-01	Behavioral Health Treatment/Services - Extension of 090x - Group Therapy	A
0916	2020-01-01	Behavioral Health Treatment/Services - Extension of 090x - Family Therapy	A
0917	2020-01-01	Behavioral Health Treatment/Services - Extension of 090x - Bio Feedback	A
0918	2020-01-01	Behavioral Health Treatment/Services - Extension of 090x - Testing	A
0919	2020-01-01	Behavioral Health Treatment/Services - Extension of 090x - Other Behavioral Health Treatments	A

Attachment 1:**00 - Payer Only Modifier #0: Separately paid fee schedule service not in HCPCS file or SI=E1**

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
006	009	028	050	00000	_A	02	1	0	0	00	Z	00	0	

01 - Payer Only Modifier #1: Separately paid drug (non-pass-thru) not in HCPCS file or SI=E1

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6		8	9	
006	009	028	050	99999	_K	02	1	0	0	00		00	0	

02 - Payer Only Modifier #2: Separately paid Pass-Thru drug not in HCPCS file or SI=E1

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
006	009	028	050	99999	_G	02	1	0	0	00	Z	00	0	

03 - Payer Only Modifier #3: Separately paid Preventive Service drug not in HCPCS file or SI=E1

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
006	009	028	050	00000	_L	04	1	0	0	00	Z	00	0	

04 - Payer Only Modifier #4: Separately paid RHC/FQHC service (CCM/Telehealth)

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
006	009	088	089	00000	A	02	1	0	0	00	5	00	0	

05 - Payer Only Modifier #5: Separately paid RHC/FQHC Vaccine service not in HCPCS file or SI=E1

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
006	009	088	089	00000	L	02	1	0	0	00	5	00	6	

06 - Payer Only Modifier #6: Separately paid Flu/PPV/Hep B Preventive Vaccine Admin not in HCPCS file or SI=E1

Contractor bypass edits				CB APC	CB SI	C B PI	C B DF	CB LID/ RF	C B PF	CB PAF1	CB PM F	CB PAF2	LIAF	IOCE Edit Output
BP 1	BP2	BP 3	BP 4	APC FLA G	1*	2	3	4	5	6	7	8	9	
006	009	028	050	0569 1	S	01	1	0	0	00	Z	09	0	

07 - Payer Only Modifier #7: Separately paid COVID Preventive Vaccine Admin not in HCPCS file or SI=E1

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
006	009	028	050	09398	S	01	1	0	0	00	Z	09	0	

08 - Payer Only Modifier #8: Separately paid Preventive Vaccine Admin Home not in HCPCS file or SI=E1

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
006	009	028	050	09399	S	01	1	0	0	00	Z	09	0	

09 - Payer Only Modifier #9: Separately paid COVID-19 Monoclonal Admin not in HCPCS file or SI=E1

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
006	009	028	050	01506	S	01	1	0	0	00	Z	09	0	

10 - Payer Only Modifier #A: Separately paid COVID-19 Monoclonal Admin Home not in HCPCS file or SI=E1

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
006	009	028	050	01509	S	01	1	0	0	00	Z	09	0	

11 - Payer Only Modifier #B: Service is payable and want to make it payable for Non-OPPS only (IOCE edit 62)

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
006				00000	_B	00	0	0	0	00	Z	00	0	62

12 - Payer Only Modifier #C: Service is payable and want to make it Noncovered (IOCE edit 9).

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
006				00000	E1	03	1	1	0	00	Z	00	0	9

13 - Payer Only Modifier #D: Service is payable and want to make it Statutorily Excluded (IOCE edit 50).

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
006				00000	E1	03	1	0	0	00	Z	00	0	50

14 - Payer Only Modifier #E: Professional Service is payable and want to make it non-payable to Institutional providers except FQHC/RHC, Hospice RC 0657, and CAH Method II RC 096x, 097x, 098x.

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
006				00000	M	03	1	0	0	00	Z	00	0	72

15 - Payer Only Modifier #F: Off-cycle Service is payable, not listed, or E1 and want to make it Packaged

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
006	009	028	050	00000	N	09	1	0	1	00	Z	00	0	

**16 - Payer Only Modifier #G: Off-cycle Invoice drug with SI = E1, G, K, K1, N, S1 changed to SI=E2
Provider must bill Value Code 92.**

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
009	028	050		00000	E2	02	1	1	0	00	Z	00	0	13

17 - Payer Only Modifier #H: Off-cycle ASP drug with SI = E1, E2, K, K1, N, S1 changed to SI=G

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
009	013	028	050	09999	G	02	1	0	0	00	Z	0	0	

18 - Payer Only Modifier #I: Off-cycle ASP drug with SI = E1, E2, G, K1, N, S1 changed to SI=K

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
009	013	028	050	09999	K	02	1	0	0	00	Z	00	0	

**19 - Payer Only Modifier #J: Off-cycle PMA Skin Substitute with SI = E1, E2, G, K, K1, N
changed to SI=S1.**

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
009	013	028	050	06000	S1	01	1	0	0	00	Z	00	0	

20 - Payer Only Modifier #K: Off-cycle 510K Skin Substitute with SI = E1, E2, G, K, K1, N changed to SI=S1.

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
009	013	028	050	06001	S1	01	1	0	0	00	Z	00	0	

21 - Payer Only Modifier #L: Off-cycle HCT/P Skin Substitute with SI = E1, E2, G, K, K1, N changed to SI=S1.

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
009	013	028	050	06002	S1	01	1	0	0	00	Z	00	0	

22 – Payer Only Modifier #M: Off-cycle First separately paid drug (K1) and Value code Z7 with payment limitation VC and rate to be sent (VC = Z7 QR9999.99) Payer only Value Code Z7= Payer only APC payment offset or payment limitation.

For October 2026 (FINAL RELEASE): The MAC passes PVC Z7 with a Value Code Amount associated with the #modifier line which is then passed out by the IOCE in the value code amount for the #modifier line associated with a “Q” PVC. If PVC Z7 is not present, return new edit to suspend the claim at the line level.

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
006	009	028	050	99999	K1	02	1	0	0	30	Z	00	0	
IOCE Value Code Output = QR 9999.99														

For October 2026 (FINAL RELEASE): The MAC passes PVC Z7 with a Value Code Amount associated with the #modifier line which is then passed out by the IOCE in the value code amount for the #modifier line associated with a “Q” PVC. If PVC Z7 is not present, return new edit to suspend the claim at the line level.

24 – Payer Only Modifier #O: Off-cycle Third separately paid drug (K1) and Value code Z7 with payment limitation VC and rate to be sent (VC = Z7 QT9999.99) Payer only Value Code Z7= Payer only APC payment offset or payment limitation.

For October 2026 (FINAL RELEASE): The MAC passes PVC Z7 with a Value Code Amount associated with the #modifier line which is then passed out by the IOCE in the value code amount for the #modifier line associated with a “Q” PVC. If PVC Z7 is not present, return new edit to suspend the claim at the line level.

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
006	009	028	050	99999	K1	02	1	0	0	32	Z	00	0	
IOCE Value Code Output = QT 9999.99														

For October 2026 (FINAL RELEASE): The MAC passes PVC Z7 with a Value Code Amount associated with the #modifier line which is then passed out by the IOCE in the value code amount for the #modifier line associated with a “Q” PVC. If PVC Z7 is not present, return new edit to suspend the claim at the line level.

For October 2026 (FINAL RELEASE): The MAC passes PVC Z7 with a Value Code Amount associated with the #modifier line which is then passed out by the IOCE in the value code amount for the #modifier line associated with a “Q” PVC. If PVC Z7 is not present, return new edit to suspend the claim at the line level.

For October 2026 (FINAL RELEASE): The MAC passes PVC Z7 with a Value Code Amount associated with the #modifier line which is then passed out by the IOCE in the value code amount for the #modifier line associated with a “Q” PVC. If PVC Z7 is not present, return new edit to suspend the claim at the line level.

28 – Payer Only Modifier #S: Off-cycle Second separately paid drug (G) and Value code Z7 with offset VC and rate to be sent (VC = Z7 QS9999.99) Payer only Value Code Z7= Payer only APC payment offset or payment limitation.

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PM F	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
006	009	028	050	99999	G	02	1	0	0	19	Z	10	0	
IOCE Value Code Output = QS 9999.99														

29 – Payer Only Modifier #T: Off-cycle Third separately paid drug (G) and Value code Z7 with offset VC and rate to be sent (VC = Z7 QT9999.99) Payer only Value Code Z7= Payer only APC payment offset or payment limitation.

For October 2026 (FINAL RELEASE): The MAC passes PVC Z7 with a Value Code Amount associated with the #modifier line which is then passed out by the IOCE in the value code amount for the #modifier line associated with a “Q” PVC. If PVC Z7 is not present, return new edit to suspend the claim at the line level.

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
006	009	028	050	99999	G	02	1	0	0	20	Z	10	0	
IOCE Value Code Output = QT 9999.99														

30 – Payer Only Modifier #U: Separately paid RHC/FQHC Preventive Vaccine Administration service not in HCPCS file or SI=E1

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PM F	CB PAF2	LIAF	IOCE Edit Output
BP 1	BP2	BP 3	BP 4	APC FLA G	1*	2	3	4	5	6	7	8	9	
006	009	088	089	00000	_S	01	1	0	0	00	Z	09	6	

31 – Payer Only Modifier #V – Service is payable and want to make it Noncovered (IOCE edit 28).

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
006				00000	E1	03	1	1	0	00	Z	00	0	28

32 – Payer Only Modifier #W – Separately paid RHC/FQHC service (Telehealth)

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
006	009	088	089	00000	_A	02	1	0	0	00	5	00	7	

33 – Payer Only Modifier #X -

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
											Z			

34 – Payer Only Modifier #Y

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
											Z			

35 – Payer Only Modifier #Z

Contractor bypass edits				CB APC	CB SI	CB PI	CB DF	CB LID/ RF	CB PF	CB PAF1	CB PMF	CB PAF2	LIAF	IOCE Edit Output
BP1	BP2	BP3	BP4	APC FLAG	1*	2	3	4	5	6	7	8	9	
											Z			