July 2023

Dear Optum 2023 HCPCS Level II Expert Customer:

The Centers for Medicare and Medicaid Services (CMS) has issued the following updates that can be marked in your book. Our customer service team is available to answer any questions at 1.800.464.3649, option 1.

Thank you for your patience and support of our ongoing efforts to deliver high-quality products. We value you as an Optum customer.

Sincerely,

Optum
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The following codes are effective July 1, 2023:

New Codes

C9150  Xenon Xe-129 hyperpolarized gas, diagnostic, per study dose

C9151  Injection, pegcetacoplan, 1 mg

C9784  Gastric restrictive procedure, endoscopic sleeve gastroplasty, with esophagogastroduodenoscopy and intraluminal tube insertion, if performed, including all system and tissue anchoring components

C9785  Endoscopic outlet reduction, gastric pouch application, with endoscopy and intraluminal tube insertion, if performed, including all system and tissue anchoring components

C9786  Echocardiography image post processing for computer aided detection of heart failure with preserved ejection fraction, including interpretation and report

C9787  Gastric electrophysiology mapping with simultaneous patient symptom profiling

J0137  Injection, acetaminophen (Hikma) not therapeutically equivalent to J0131, 10 mg

J0206  Injection, allopurinol sodium, 1 mg

J0216  Injection, alfentanil HCl, 500 mcg

J0457  Injection, aztreonam, 100 mg

J0665  Injection, bupivicaine, not otherwise specified, 0.5 mg

J0736  Injection, clindamycin phosphate, 300 mg
J0737  Injection, clindamycin phosphate (Baxter), not therapeutically equivalent to J0736, 300 mg
J1440  Fecal microbiota, live - jslm, 1 ml
J1576  Injection, immune globulin (Panzyga), intravenous, non-lyophilized (e.g., liquid), 500 mg
J1805  Injection, esmolol HCl, 10 mg
J1806  Injection, esmolol HCl (WG Critical Care) not therapeutically equivalent to J1805, 10 mg
J1811  Insulin (Fiasp) for administration through DME (i.e., insulin pump) per 50 units
J1812  Insulin (Fiasp), per 5 units
J1813  Insulin (Lyumjev) for administration through DME (i.e., insulin pump) per 50 units
J1814  Insulin (Lyumjev), per 5 units
J1836  Injection, metronidazole, 10 mg
J1920  Injection, labetalol HCl, 5 mg
J1921  Injection, labetalol HCl (Hikma) not therapeutically equivalent to J1820, 5 mg
J1941  Injection, furosemide (Furoscix), 20 mg
J1961  Injection, lenacapavir, 1 mg
J2249  Injection, remimazolam, 1 mg
J2305  Injection, nitroglycerin, 5 mg
J2329  Injection, ublituximab-xii, 1mg
J2371  Injection, phenylephrine HCl, 20 mcg
J2372  Injection, phenylephrine HCl (Biorphen), 20 mcg
J2427  Injection, paliperidone palmitate extended release (Invega Hafyera or Invega Trinza), 1 mg
J2561  Injection, phenobarbital sodium (Sezaby), 1 mg
J2598  Injection, vasopressin, 1 unit
J2599  Injection, vasopressin (American Regent) not therapeutically equivalent to J2598, 1 unit
J2806  Injection, sinalide (MAIA) not therapeutically equivalent to J2805, 5 mcg
J7213  Injection, coagulation factor IX (recombinant), lxinity, 1 IU
J9029  Injection, nadofaragene firadenovec-vncg, per therapeutic dose
J9056  Injection, bendamustine HCl (Vivimusta), 1 mg
J9058  Injection, bendamustine HCl (Apotex), 1 mg
J9059  Injection, bendamustine HCl (Baxter), 1 mg
J9063  Injection, mirvetuximab soravtansine-gynx, 1 mg
J9259  Injection, paclitaxel protein-bound particles (American Regent) not therapeutically equivalent to J9264, 1 mg
J9321  Injection, pemetrexed (Sandoz) not therapeutically equivalent to J9305, 10 mg
J9322  Injection, pemetrexed (BluePoint) not therapeutically equivalent to J9305, 10 mg
J9323  Injection, pemetrexed (Hospira) not therapeutically equivalent to J9305, 10 mg
J9347  Injection, tremelimumab-aclt, 1 mg
J9350  Injection, mosunetuzumab-axgb, 1 mg
J9380  Injection, teclistamab-cqyv, 0.5 mg
J9381  Injection, teplizumab-mzwv, 5 mcg
Q4272  Esano A, per sq cm
Q4273  Esano AAA, per sq cm
Q4274  Esano AC, per sq cm
Q4275  Esano ACA, per sq cm
Q4276  ORION, per sq cm
Q4277  WoundPlus membrane or E-Graft, per sq cm
Q4278  EPIEFFECT, per sq cm
Q4280  Xcell Amnio Matrix, per sq cm
Q4281  Barrera SL or Barrera DL, per sq cm
Q4282  Cygnus Dual, per sq cm
Q4283  Biovance Tri-Layer or Biovance 3L, per sq cm
Q4284  DermaBind SL, per sq cm
Q5131  Injection, adalimumab-aacf (Idacio), biosimilar, 20 mg

Revised Codes

J2426  Injection, paliperidone palmitate extended release (Invega Sustenna), 1 mg

Deleted Codes

C9146  Injection, mirvetuximab soravtansine-gynx, 1 mg
C9147  Injection, tremelimumab-actl, 1 mg
C9148  Injection, teclistamab-cqv, 0.5 mg
J2370  Injection, phenylephrine HCl, up to 1 ml
S0020  Injection, bupivicaine HCl, 30 ml
S0030  Injection, metronidazole, 500 mg
S0073  Injection, aztreonam, 500 mg
S0077  Injection, clindamycin phosphate, 300 mg