



CPT/HCPCS

Codes 2026

Added | Revised | Deleted

BONUS: ICD-10 Codes for 2026

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2026 CPT Codes

Below are the 2026 CPT code updates. This list includes new CPT codes, revised codes and deleted codes.

Added CPT Codes for 2026

Speciality	CPT Code	Description
Proprietary Laboratory Analyses		
Proprietary Laboratory Analyses	0552U	Reproductive medicine (preimplantation genetic assessment), analysis for known genetic disorders from trophectoderm biopsy, linkage analysis of disease-causing locus, and when possible, targeted mutation analysis for known familial variant, reported as low-risk or high-risk for familial genetic disorder
Proprietary Laboratory Analyses	0553U	Reproductive medicine (preimplantation genetic assessment), analysis of 24 chromosomes using DNA genomic sequence analysis from embryonic trophectoderm for structural rearrangements, aneuploidy, and a mitochondrial DNA score, results reported as normal/balanced (euploidy/balanced), unbalanced structural rearrangement, monosomy, trisomy, segmental aneuploidy, or mosaic, per embryo tested
Proprietary Laboratory Analyses	0554U	Reproductive medicine (preimplantation genetic assessment), analysis of 24 chromosomes using DNA genomic sequence analysis from trophectoderm biopsy for aneuploidy, ploidy, a mitochondrial DNA score, and embryo quality control, results reported as normal (euploidy), A monosomy, trisomy, segmental aneuploidy, triploid, haploid, or mosaic, with quality control results reported as contamination detected or inconsistent cohort when applicable, per embryo tested
Proprietary Laboratory Analyses	0555U	Reproductive medicine (preimplantation genetic assessment), analysis of 24 chromosomes using DNA genomic sequence analysis from embryonic trophectoderm for structural rearrangements, aneuploidy, ploidy, a mitochondrial DNA score, and embryo quality control, results reported as A normal/balanced (euploidy/balanced), unbalanced structural rearrangement, monosomy, trisomy, segmental aneuploidy, triploid, haploid, or mosaic, with quality control results reported as contamination detected or inconsistent cohort when applicable, per embryo tested
Proprietary Laboratory Analyses	0556U	Infectious disease (bacterial or viral respiratory tract infection), pathogen-specific DNA and RNA by real-time PCR, 12 targets, nasopharyngeal or oropharyngeal swab, including multiplex reverse transcription for RNA targets, each analyte reported as detected or not detected
Proprietary Laboratory Analyses	0557U	Infectious disease (bacterial vaginosis and vaginitis), real-time amplification of DNA markers for Atopobium vaginae, Gardnerella vaginalis, Megaspheara types 1 and 2, bacterial vaginosis associated bacteria-2 and -3 (BVAB-2, BVAB-3), Mobiluncus species, Trichomonas vaginalis, Neisseria gonorrhoeae, Candida species (C.albicans, C. tropicalis, C. parapsilosis, C. glabrata, C. krusei), Herpes simplex viruses 1 and 2, vaginal fluid, reported as detected or not detected for each organism
Proprietary Laboratory Analyses	0558U	Oncology (colorectal), quantitative enzyme-linked immunosorbent assay (ELISA) for secreted, colorectal cancer protein marker (BF7 antigen) using serum, result reported as indicative of response/no response to therapy or disease progression/regression
Proprietary Laboratory Analyses	0559U	Oncology (breast), quantitative enzyme-linked immunosorbent assay (ELISA) for secreted breast cancer protein marker (BF9 antigen), serum, result reported as indicative of response/no response to therapy or disease progression/regression
Proprietary Laboratory Analyses	0560U	Oncology (minimal residual disease [MRD]), genomic sequence analysis, cell-free DNA, whole blood and tumor tissue, baseline assessment for design and construction of a personalized variant panel to evaluate current MRD and for comparison to subsequent MRD assessments
Proprietary Laboratory Analyses	0561U	Oncology (minimal residual disease [MRD]), genomic sequence analysis, cell-free DNA, whole subsequent assessment with comparison to initial assessment to evaluate for MRD
Proprietary Laboratory Analyses	0562U	Oncology (solid tumor), targeted genomic sequence analysis, 33 genes, detection of single- nucleotide variants (SNVs), insertions and deletions, copy-number amplifications, and A translocations in human genomic circulating cell-free DNA, plasma, reported as presence of actionable variants
Proprietary Laboratory Analyses	0563U	Infectious disease (bacterial and/or viral respiratory tract infection), pathogen-specific nucleic acid (DNA or RNA), 11 viral targets and 4 bacterial targets, qualitative RT-PCR, upper respiratory specimen, each pathogen
Proprietary Laboratory Analyses	0564U	Infectious disease (bacterial and/or viral respiratory tract infection), pathogen-specific nucleic acid (DNA or RNA), 10 viral targets and 4 bacterial targets, qualitative RT-PCR, upper respiratory specimen, each pathogen reported as positive or negative
Proprietary Laboratory Analyses	0565U	Oncology (hepatocellular carcinoma), next- generation sequencing methylation pattern assay to detect 6626 epigenetic alterations, cell-free A DNA, plasma, algorithm reported as cancer signal detected or not detected
Proprietary Laboratory Analyses	0566U	Oncology (lung), qPCRbased analysis of 13 differentially methylated regions (CCDC181, HOXA7, LRRC8A, MARCHF11, MIR129-2, NCOR2, PANTR1, PRKCB, SLC9A3, TBR1 2, TRAP1, VWC2, ZNF781), pleural fluid,
Proprietary Laboratory Analyses	0567U	Rare diseases (constitutional/heritable disorders), whole-genome sequence analysis combination of short and long reads, for single-nucleotide variants, insertions/deletions and characterized intronic variants, copy-number variants, duplications/deletions, mobile element insertions, runs of homozygosity, aneuploidy, and inversions, mitochondrial DNA sequence and deletions, short tandem repeat genes, methylation status of selected regions, blood, saliva, amniocentesis, chorionic villus sample or tissue, identification and categorization of genetic variants
Proprietary Laboratory Analyses	0568U	Neurology (dementia), beta amyloid (Aß40, Aß42, Aß42/40 ratio), tau-protein phosphorylated at residue (eg, pTau217), neurofilament light chain (NFL), and glial fibrillary acidic protein (GFAP), by ultra-high sensitivity molecule array detection, plasma, algorithm reported as positive, intermediate, or negative for Alzheimer pathology
Proprietary Laboratory Analyses	0569U	Oncology (solid tumor), next generation sequencing analysis of tumor methylation markers (>20000 differentially methylated regions) present in cell-free circulating tumor DNA (ctDNA), A whole blood, algorithm reported as presence or absence of ctDNA with tumor fraction, if appropriate

Added CPT Codes for 2026

Speciality	CPT Code	Description
Proprietary Laboratory Analyses	0570U	Neurology (traumatic brain injury), analysis of glial fibrillary acidic protein (GFAP) and ubiquitin carboxylterminal hydrolase L1 (UCHL1), immunoassay, whole blood or plasma, individual components reported with the overall result of elevated or non-elevated based on threshold comparison
Proprietary Laboratory Analyses	0571U	Oncology (solid tumor), DNA (80 genes) and RNA (10 genes), by next-generation sequencing, plasma, including single-nucleotide variants, insertions/deletions, copy-number alterations, microsatellite instability, and fusions, reported as clinically actionable variants
Proprietary Laboratory Analyses	0572U	Oncology (prostate), high-throughput telomere length quantification by FISH, whole blood, A diagnostic algorithm reported as risk of prostate cancer
Proprietary Laboratory Analyses	0573U	Oncology (pancreas), 3 biomarkers (glucose, carcinoembryonic antigen, and gastrin), pancreatic cyst lesion fluid, algorithm reported as categorical mucinous or non-mucinous
Proprietary Laboratory Analyses	0574U	Mycobacterium tuberculosis, culture filtrate protein—10-kDa (CFP-10), serum or plasma, liquid chromatography mass spectrometry (LC-MS)
Proprietary Laboratory Analyses	0600U	Infectious disease (wound infection), identification of 65 organisms and 30 antibiotic resistance genes, wound swab, real-time PCR, reported as positive or negative for each organism
Proprietary Laboratory Analyses	0601U	Infectious disease (periprosthetic joint infection), analysis of 11 biomarkers (alpha defensins 1–3, C-reactive protein, microbial antigens for Staphylococcus [SPA, SPB], Enterococcus, Candida, and C. acnes, total nucleated cell count, percent neutrophils, RBC count, and absorbance at 280 nm) using immunoassays, hematology, clinical chemistry, synovial fluid, and diagnostic algorithm reported as a probability score
Proprietary Laboratory Analyses	0602U	Endocrinology (diabetes), insulin (INS) gene methylation using digital droplet PCR, insulin, and C-peptide immunoassay, serum, Hemoglobin A1c immunoassay, whole blood, algorithm reported as diabetes-risk score
Proprietary Laboratory Analyses	0603U	Drug assay, presumptive, 77 drugs or metabolites, urine, liquid chromatography with tandem mass spectrometry (LC-MS/MS), results reported as positive or negative
Proprietary Laboratory Analyses	0604U	Allergy and immunology (chronic recurrent angioedema), 4 bradykinin peptides, liquid chromatography and tandem mass spectrometry (LC-MS/MS), whole blood, quantitative
Proprietary Laboratory Analyses	0605U	Allergy and immunology (hereditary alpha tryptasemia), DNA, analysis of TPSAB1 gene copy number variation using digital PCR, whole blood, results reported with genotype-specific interpretation of alpha-tryptase copy number and algorithmic classification as normal or abnormal
Proprietary Laboratory Analyses	0606U	Hematology (red cell membrane disorders), RBCs, osmotic gradient ektacytometry, whole blood, quantitative
Proprietary Laboratory Analyses	0607U	Reproductive medicine (endometrial microbiome assessment), real-time PCR analysis for 31 bacterial DNA targets from endometrial biopsy, reported with quantified levels of bacterial presence and targeted treatment recommendations
Proprietary Laboratory Analyses	0608U	Reproductive medicine (endometrial microbiome assessment), real-time PCR analysis for 10 bacterial DNA targets from endometrial biopsy, reported with quantified levels of bacterial presence and targeted treatment recommendations
Proprietary Laboratory Analyses	0609U	Oncology (prostate), immunoassay for total prostate-specific antigen (PSA) and free PSA, serum or plasma, combined with clinical features, algorithm reported as a probability score for clinically significant prostate cancer
Proprietary Laboratory Analyses	0610U	Infectious disease (antimicrobial susceptibility), phenotypic antimicrobial susceptibility testing of positive blood culture using microfluidic sensor technology to quantify bacterial growth response to multiple antibiotic types, reporting categorical susceptibility (susceptible, susceptible dose dependent, intermediate, resistant), minimum inhibitory concentration, and interpretive comments
Proprietary Laboratory Analyses	0611U	Oncology (liver), analysis of over 1,000 methylated regions, cell-free DNA from plasma, algorithm reported as a quantitative result
Proprietary Laboratory Analyses	0612U	Oncology (liver), analysis of over 1,000 methylated regions, cell-free DNA from plasma, algorithm reported as a quantitative result
Proprietary Laboratory Analyses	0613U	Oncology (urothelial carcinoma), DNA methylation and mutation analysis of 6 biomarkers (TWIST1, OTX1, ONECUT2, FGFR3, HRAS, TERT promoter region), methylation-specific PCR and targeted next-generation sequencing, urine, algorithm reported as a probability index for bladder cancer and upper tract urothelial carcinoma

Category III

Category III	0948T	Interrogation device evaluation (remote), up to 90 days, cardiac contractility modulation system with interim analysis, review and report(s) by a physician or other qualified health care professional
Category III	0949T	Interrogation device evaluation (remote), up to 90 days, cardiac contractility modulation system, remote data acquisition(s), receipt of transmissions, technician review, technical support, and distribution of results
Category III	0950T	Ablation of benign prostate tissue, transrectal, with high intensity— focused ultrasound (HIFU), including ultrasound guidance
Category III	0951T	Totally implantable active middle ear hearing implant; initial placement, including mastoidectomy, placement of and attachment to sound processor
Category III	0952T	Totally implantable active middle ear hearing implant; revision or replacement, with mastoidectomy and replacement of sound processor
Category III	0953T	Totally implantable active middle ear hearing implant; revision or replacement, without mastoidectomy and replacement of sound processor
Category III	0954T	Totally implantable active middle ear hearing implant; replacement of sound processor only, with attachment to existing transducers
Category III	0955T	Totally implantable active middle ear hearing implant; removal, including removal of sound processor and all implant components

Added CPT Codes for 2026

Speciality	CPT Code	Description
Category III	0956T	Partial craniectomy, channel creation, and tunneling of electrode for sub-scalp implantation of an electrode array, receiver, and telemetry unit for continuous bilateral electroencephalography monitoring system, including imaging guidance
Category III	0957T	Revision of sub-scalp implanted electrode array, receiver, and telemetry unit for electrode, when required, including imaging guidance
Category III	0958T	Removal of sub-scalp implanted electrode array, receiver, and telemetry unit for continuous bilateral electroencephalography monitoring system, including imaging guidance
Category III	0959T	Removal or replacement of magnet from coil assembly that is connected to continuous bilateral electroencephalography monitoring system, including imaging guidance
Category III	0960T	Replacement of sub-scalp implanted electrode array, receiver, and telemetry unit with tunneling of electrode for continuous bilateral electroencephalography monitoring system, including imaging guidance
Category III	0961T	Shortwave infrared radiation imaging, surgical pathology specimen, to assist gross examination for lymph node localization in fibroadipose tissue, per specimen (List separately in addition to code for primary procedure)
Category III	0962T	Assistive algorithmic analysis of acoustic and electrocardiogram recording for detection of cardiac dysfunction (eg, reduced ejection fraction, cardiac murmurs, atrial fibrillation), with review and interpretation by a physician or other qualified health care professional
Category III	0963T	Anoscopy with directed submucosal injection of bulking agent into anal canal
Category III	0964T	Impression and custom preparation of jaw expansion oral prosthesis for obstructive sleep apnea, including initial adjustment; single arch, without mandibular advancement mechanism
Category III	0965T	Impression and custom preparation of jaw expansion oral prosthesis for obstructive sleep apnea, including initial adjustment; dual arch, with additional mandibular advancement, non-fixed hinge mechanism
Category III	0966T	Impression and custom preparation of jaw expansion oral prosthesis for obstructive sleep apnea, including initial adjustment; dual arch, with additional mandibular advancement, fixed hinge mechanism
Category III	0967T	Transanal insertion of endoluminal temporary colorectal anastomosis protection device, including vacuum anchoring component and flexible sheath connected to external vacuum source and monitoring system
Category III	0968T	Insertion or replacement of epicranial neurostimulator system, including electrode array and pulse generator, with connection to electrode array
Category III	0969T	Removal of epicranial neurostimulator system
Category III	0970T	Ablation, benign breast tumor (eg, fibroadenoma), percutaneous, laser, including imaging guidance when performed, each tumor
Category III	0971T	Ablation, malignant breast tumor(s), percutaneous, laser, including imaging guidance when performed, unilateral
Category III	0972T	Ablation, benign breast tumor (eg, fibroadenoma), percutaneous, laser, including imaging guidance when performed, each tumor
Category III	0973T	Assistive algorithmic classification of burn healing (ie, healing or nonhealing) by noninvasive multispectral imaging, including system set-up and acquisition, selection, and transmission of images, with automated generation of report
Category III	0974T	Selective enzymatic debridement, partial-thickness and/or full thickness burn eschar, requiring anesthesia (ie, general anesthesia, moderate sedation), including patient monitoring, trunk, arms, legs; first 100 sq cm
Category III	0975T	Selective enzymatic debridement, partial-thickness and/or full thickness burn eschar, requiring anesthesia (ie, general anesthesia, moderate sedation), including patient monitoring, trunk, arms, legs; each additional 100 sq cm (List separately in addition to code for rim procedure)
Category III	0976T	Selective enzymatic debridement, partial-thickness and/or full thickness burn eschar, requiring anesthesia (ie, general anesthesia, moderate sedation), including patient monitoring, scalp, neck, hands, feet, and/or multiple digits; first 100 sq cm
Category III	0977T	Selective enzymatic debridement, partial-thickness and/or full thickness burn eschar, requiring anesthesia (ie, general anesthesia, moderate sedation), including patient monitoring, scalp, neck, hands, feet, and/or multiple digits; each additional 100 sq cm (List separately in addition to code for rima procedure)
Category III	0978T	Upper gastrointestinal blood detection, sensor capsule, with interpretation and report
Category III	0979T	Submucosal cryolysis therapy; soft palate, base of tongue, and lingual tonsil
Category III	0980T	Submucosal cryolysis therapy; soft palate only
Category III	0981T	Submucosal cryolysis therapy; base of tongue and lingual tonsil only
Category III	0982T	Transcatheter implantation of wireless inferior vena cava sensor for long-term hemodynamic monitoring, including deployment of the sensor, radiological supervision and interpretation, right heart catheterization, and inferior vena cava venography, when performed
Category III	0983T	Remote monitoring of implantable inferior vena cava pressure sensor, physiologic parameter(s) (eg, weight, blood pressure, pulse oximetry, respiratory flow rate), initial set-up and patient education on use of equipment
Category III	0984T	Remote monitoring of an implanted inferior vena cava sensor for up to 30 days, including at least weekly downloads of inferior vena cava area recordings, interpretation(s), trend analysis, and report(s) by a physician or other qualified health care professional
Category III	0985T	Intravascular imaging of extracranial cerebral vessels using optical coherence tomography (OCT) during diagnostic evaluation and/or therapeutic intervention, including all associated radiological supervision, interpretation, and report; each additional vessel (List separately in addition to code for primary procedure)

Added CPT Codes for 2026

Speciality	CPT Code	Description
Category III	0986T	Intravascular imaging of intracranial cerebral vessels using optical coherence tomography (OCT) during diagnostic evaluation and/or therapeutic intervention, including all associated radiological supervision, interpretation, and report; initial vessel (List separately in addition to code for primary procedure)
Category III	0987T	Intravascular imaging of intracranial cerebral vessels using optical coherence tomography (OCT) during diagnostic evaluation and/or therapeutic intervention, including all associated radiological supervision, interpretation, and report; each additional vessel (List separately in addition to code for rima procedure)
Category III	0988T	Open insertion or replacement of integrated neurostimulation system for bladder dysfunction including electrode(s) (eg, array or leadless), and pulse generator or receiver, including analysis, programming, and imaging guidance, when performed, posterior tibial nerve; subcutaneous and subfascial
Category III	0989T	Revision or removal of integrated neurostimulation system for bladder dysfunction, including analysis, programming, and imaging, when performed, posterior tibial nerve; subcutaneous and subfascial
Category III	0990T	Transcervical instillation of biodegradable hydrogel materials, intrauterine
Category III	0991T	Cystourethroscopy, with low-energy lithotripsy and acoustically actuated microspheres, including imaging
Category III	0992T	Noninvasive assessment of cardiac risk derived from augmentative software analysis of perivascular fat without concurrent computed tomography (CT) scan of the heart, including patient-specific clinical factors, with interpretation and report by a physician or other qualified health care professional
Category III	0993T	Noninvasive assessment of cardiac risk derived from augmentative software analysis of perivascular fat with concurrent computed tomography scan of the heart, including patient-specific clinical factors, with interpretation and report by a physician or other qualified health care professional (List separately in addition to code for primary procedure)
Category III	0994T	Endovascular delivery of aortic wall stabilization drug therapy through a sheath positioned within an abdominal aortic aneurysm, with aortic roadmapping, balloon occlusion, imaging guidance, and radiological supervision and interpretation; percutaneous
Category III	0995T	Endovascular delivery of aortic wall stabilization drug therapy through a sheath positioned within an abdominal aortic aneurysm, with aortic roadmapping, balloon occlusion, imaging guidance, and radiological supervision and interpretation; open
Category III	0996T	Insertion and scleral fixation of a capsular bag prosthesis containing an intraocular lens prosthesis, with vitrectomy, including removal of crystalline lens or dislocated intraocular lens prosthesis, when performed
Category III	0997T	Precuneus magnetic stimulation; treatment planning using magnetic resonance imaging-guided neuronavigation to determine optimal location, dose, and intensity for magnetic stimulation therapy, derived from evoked potentials from single pulses of electromagnetic energy recorded by 64-channel electroencephalogram, including automated data processing, transmission, analysis, generation of treatment parameters with review, interpretation, and report
Category III	0998T	Precuneus magnetic stimulation; personalized treatment delivery of magnetic stimulation therapy to a prespecified target area derived from analysis of evoked potentials within the precuneus, utilizing magnetic resonance imaging-based neuronavigation, with management, per day
Category III	0999T	Autologous muscle cell therapy, harvesting of muscle progenitor cells, including ultrasound guidance, when performed
Category III	1000T	Autologous muscle cell therapy, administration of muscle progenitor cells into the urethral sphincter, including cystoscopy and post-void residual ultrasound, when performed
Category III	1001T	Autologous muscle cell therapy, injection of muscle progenitor cells into the external anal sphincter, including ultrasound guidance, when performed
Category III	1002T	Air displacement plethysmography, whole-body composition assessment, with interpretation and report
Category III	1003T	Arthroplasty, first carpometacarpal joint, with distal trapezial and proximal first metacarpal prosthetic replacement (eg, first carpometacarpal total joint)
Category III	1004T	Electronic analysis of implanted sub-scalp continuous bilateral electroencephalography monitoring system (eg, contact group[s], gain, bandpass filters) by physician or other qualified health care professional; without programming
Category III	1005T	Electronic analysis of implanted sub-scalp continuous bilateral electroencephalography monitoring system (eg, contact group[s], gain, bandpass filters) by physician or other qualified health care professional; with programming, first 15 minutes face-to-face time with physician or other qualified health care professional
Category III	1006T	Electronic analysis of implanted sub-scalp continuous bilateral electroencephalography monitoring system (eg, contact group[s], gain, bandpass filters) by physician or other qualified health care professional; with programming, each additional 15 minutes face-to-face time with physician or other qualified health care professional (List separately in addition to code for primary procedure)
Category III	1007T	Electroencephalogram from implanted sub-scalp continuous bilateral electroencephalography monitoring system, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation, and report, up to 30 days of recording without video
Category III	1008T	Remote monitoring of sub-scalp implanted continuous bilateral electroencephalography monitoring system, device fitting, initial set-up, and patient education in wearing of system and use of equipment
Category III	1009T	Remote monitoring of a sub-scalp implanted continuous bilateral electroencephalography monitoring system, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation, and report, up to 30 days of recording without video
Category III	1010T	Computerized ophthalmic analysis of monocular eye movements using retinal-based eye-tracking without spatial calibration, including fixation, microsaccades, drift, and horizontal saccades, when performed, unilateral or bilateral, with interpretation and report
Category III	1011T	Photobiomodulation (PBM) therapy of oral cavity, including placement of an oral device, monitoring of patient tolerance to treatment, and removal of the oral device

Added CPT Codes for 2026

Speciality	CPT Code	Description
Category III	1012T	Motorized ab interno trephination of sclera (sclerostomy), or trabecular meshwork (trabeculostomy), 1 or more, including injection of antifibrotic agents, when performed
Category III	1013T	Laparoscopy, surgical, implantation or replacement of lower esophageal sphincter neurostimulator electrode array and neurostimulator pulse generator or receiver, requiring pocket creation and connection between electrode array and pulse generator or receiver, including cruroplasty and/or electronic analysis, when performed
Category III	1014T	Laparoscopic revision or removal, lower esophageal sphincter neurostimulator electrodes
Category III	1015T	Revision or removal, lower esophageal sphincter neurostimulator pulse generator or receiver
Category III	1016T	Electronic analysis of implanted neurostimulator pulse generator system (eg, rate, pulse amplitude and duration, configuration of waveform, battery status, electrode selectability, output modulation, cycling, impedance and patient measurements), lower esophageal sphincter neurostimulator pulse generator/transmitter; intraoperative, with programming
Category III	1017T	Electronic analysis of implanted neurostimulator pulse generator system (eg, rate, pulse amplitude and duration, configuration of waveform, battery status, electrode selectability, output modulation, cycling, impedance and patient measurements), lower esophageal sphincter neurostimulator pulse generator/transmitter; subsequent, without reprogramming
Category III	1018T	Electronic analysis of implanted neurostimulator pulse generator system (eg, rate, pulse amplitude and duration, configuration of waveform, battery status, electrode selectability, output modulation, cycling, impedance and patient measurements), lower esophageal sphincter neurostimulator pulse generator/transmitter; subsequent, with reprogramming
Category III	1019T	Lymphovenous bypass, including robotic assistance, when performed, per extremity
Category III	1020T	Raman spectroscopy of 1 or more skin lesions, with probability score for malignant risk derived by algorithmic analysis of data from each lesion
Category III	1021T	Active thoracic irrigation (separate procedure)
Category III	1022T	Percutaneous tissue displacement, any method, including imaging guidance; intra-abdominal/pelvic structures (List separately in addition to code for primary procedure)
Category III	1023T	Percutaneous tissue displacement, any method, including imaging guidance; intrathoracic structures (List separately in addition to code for primary procedure)
Category III	1024T	Percutaneous tissue displacement, any method, including imaging guidance; soft tissue (List separately in addition to code for primary procedure)
Category III	1025T	Alternating electric fields dosimetry and delivery-simulation modeling, creation and selection of patient-specific array layouts, and placement verification

Evaluation and Management

Evaluation and Management	99445	Remote monitoring of physiologic parameter(s) (eg, weight, blood pressure, pulse oximetry, respiratory flow rate); device(s) supply with daily recording(s) or programmed alert(s) transmission, 2-15 days in a 30-day period
Evaluation and Management	99470	Remote physiologic monitoring treatment management services, clinical staff/physician/other qualified health care professional time in a calendar month requiring 1 real-time interactive communication with the patient/caregiver during the calendar month; first 10 minutes

Medicine Services and Procedures

Medicine Services and Procedures	90481	Immunization administration by intramuscular injection, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine; each additional component administered (List separately in addition to code for primary procedure)
Medicine Services and Procedures	90482	Immunization counseling by physician or other qualified health care professional when immunization(s) is not administered by provider on the same date of service; 3 minutes up to 10 minutes
Medicine Services and Procedures	90483	Immunization counseling by physician or other qualified health care professional when immunization(s) is not administered by provider on the same date of service; greater than 10 minutes up to 20 minutes
Medicine Services and Procedures	90484	Immunization counseling by physician or other qualified health care professional when immunization(s) is not administered by provider on the same date of service; greater than 20 minutes
Medicine Services and Procedures	91124	Rectal sensation, tone, and compliance study (eg, barostat)
Medicine Services and Procedures	91125	Anorectal manometry, with rectal sensation and rectal balloon expulsion test, when performed
Medicine Services and Procedures	92288	Screening dark adaptation measurement (eg, rod recovery intercept time), with interpretation and report
Medicine Services and Procedures	92628	Evaluation for hearing aid candidacy, unilateral or bilateral, including review and integration of audiologic function tests, assessment, and interpretation of hearing needs (eg, speech-in-noise, suprathreshold hearing measures), discussion of candidacy results, counseling on treatment options with report, and, when performed, assessment of cognitive and communication status; first 30 minutes
Medicine Services and Procedures	92629	Evaluation for hearing aid candidacy, unilateral or bilateral, including review and integration of audiologic function tests, assessment, and interpretation of hearing needs (eg, speech-in-noise, suprathreshold hearing measures), discussion of candidacy results, counseling on treatment options with report, and, when performed, assessment of cognitive and communication status; each additional 15 minutes (List separately in addition to code for primary procedure)
Medicine Services and Procedures	92631	Hearing aid selection services, unilateral or bilateral, including review of audiologic function tests and hearing aid candidacy evaluation, assessment of visual and dexterity limitations, and psychosocial factors, establishment of device type, output requirements, signal processing strategies and additional features, discussion of device recommendations with report; first 30 minutes

Added CPT Codes for 2026

Speciality	CPT Code	Description
Medicine Services and Procedures	92632	Hearing aid selection services, unilateral or bilateral, including review of audiologic function tests and hearing aid candidacy evaluation, assessment of visual and dexterity limitations, and psychosocial factors, establishment of device type, output requirements, signal processing strategies and additional features, discussion of device recommendations with report; each additional 15 minutes (List separately in addition to code for primary procedure)
Medicine Services and Procedures	92634	Hearing aid fitting services, unilateral or bilateral, including device analysis, programming, verification, counseling, orientation, and training, and, when performed, hearing assistive device, supplemental technology fitting services; first 60 minutes
Medicine Services and Procedures	92635	Hearing aid fitting services, unilateral or bilateral, including device analysis, programming, verification, counseling, orientation, and training, and, when performed, hearing assistive device, supplemental technology fitting services; each additional 15 minutes (List separately in addition to code for primary procedure)
Medicine Services and Procedures	92636	Hearing aid post-fitting follow-up services, unilateral or bilateral, including confirmation of physical fit, validation of patient benefit and performance, sound quality of device, adjustment(s) (eg, verification, programming adjustment[s], device connection[s], and device training), as indicated, and, when performed, hearing assistive device, supplemental technology fitting services; first 30 minutes
Medicine Services and Procedures	92637	Hearing aid post-fitting follow-up services, unilateral or bilateral, including confirmation of physical fit, validation of patient benefit and performance, sound quality of device, adjustment(s) (eg, verification, programming adjustment[s], device connection[s], and device training), as indicated, and, when performed, hearing assistive device, supplemental technology fitting services; each additional 15 minutes (List separately in addition to code for primary procedure)
Medicine Services and Procedures	92638	Behavioral verification of amplification including aided thresholds, functional gain, speech-in-noise, when performed (List separately in addition to code for primary procedure)
Medicine Services and Procedures	92639	Hearing-aid measurement, verification with probe-microphone (List separately in addition to code for primary procedure)
Medicine Services and Procedures	92641	Hearing device verification, electroacoustic analysis
Medicine Services and Procedures	92642	Hearing assistive device, supplemental technology fitting services (eg, personal frequency modulation [FM]/digital modulation [DM] system, remote microphone, alerting devices)
Medicine Services and Procedures	92930	Percutaneous transcatheter placement of intracoronary stent(s), with coronary angioplasty when performed, single major coronary artery and/or its branch(es); 2 or more distinct coronary lesions with 2 or more coronary stents deployed in 2 or more coronary segments, or a bifurcation lesion requiring angioplasty and/or stenting in both the main artery and the side branch
Medicine Services and Procedures	92945	Percutaneous transluminal revascularization of chronic total occlusion, single coronary artery, coronary artery branch, or coronary artery bypass graft, and/or subtended major coronary artery branches of the bypass graft, any combination of intracoronary stent, atherectomy and angioplasty; combined antegrade and retrograde approaches
Medicine Services and Procedures	93145	Interrogation device evaluation (in person), carotid sinus baroreflex activation therapy (BAT) modulation system including telemetric iterative communication with the implantable device to monitor device diagnostics and programmed therapy values, with interpretation and report (eg, battery status, lead impedance, pulse amplitude, pulse width, therapy frequency, pathway mode, burst mode, therapy start/stop times each day); without programming
Medicine Services and Procedures	93146	Interrogation device evaluation (in person), carotid sinus baroreflex activation therapy (BAT) modulation system including telemetric iterative communication with the implantable device to monitor device diagnostics and programmed therapy values, with interpretation and report (eg, battery status, lead impedance, pulse amplitude, pulse width, therapy frequency, pathway mode, burst mode, therapy start/stop times each day); with programming, including optimization of tolerated therapeutic level setting
Medicine Services and Procedures	97007	Mechanical scalp cooling, including individual cap supply with head measurement, fitting, and patient education
Medicine Services and Procedures	97008	Mechanical scalp cooling; including hair preparation, individual cap placement, therapy initiation, and precooling period
Medicine Services and Procedures	97009	Mechanical scalp cooling; provided after discontinuation of chemotherapy, each 30 minutes (List separately in addition to code for primary procedure)
Medicine Services and Procedures	98979	Remote therapeutic monitoring treatment management services, physician or other qualified health care professional time in a calendar month requiring at least 1 real-time interactive communication with the patient or caregiver during the calendar month; first 10 minutes
Medicine Services and Procedures	98984	Remote therapeutic monitoring (eg, therapy adherence, therapy response, digital therapeutic intervention); device(s) supply for data access or data transmissions to support monitoring of respiratory system, 2-15 days in a 30-day period
Medicine Services and Procedures	98985	Remote therapeutic monitoring (eg, therapy adherence, therapy response, digital therapeutic intervention); device(s) supply for data access or data transmissions to support monitoring of musculoskeletal system, 2-15 days in a 30-day period
Medicine Services and Procedures	98986	Remote therapeutic monitoring (eg, therapy adherence, therapy response, digital therapeutic intervention); device(s) supply for data access or data transmissions to support monitoring of cognitive behavioral therapy, 2-15 days in a 30-day period
Medicine Services and Procedures	90382	Respiratory syncytial virus, monoclonal antibody, seasonal dose, 0.7 mL, for intramuscular use
Medicine Services and Procedures	90612	Influenza virus vaccine, trivalent, and severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, 31.7 mcg/0.32 mL dosage, for intramuscular use
Medicine Services and Procedures	90613	Influenza virus vaccine, quadrivalent, and severe acute respiratory syndrome coronavirus 2 (SARSCOV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, 40 mcg/0.4 mL dosage, for intramuscular use
Medicine Services and Procedures	90631	Influenza virus vaccine (IIV), H5, pandemic formulation, split virus, adjuvanted, for intramuscular use
Medicine Services and Procedures	90635	Influenza virus vaccine, H5N1, derived from cell cultures, adjuvanted, for intramuscular use
Medicine Services and Procedures	91323	Severe acute respiratory syndrome coronavirus 2 disease [COVID-19] vaccine, mRNA-LNP, 10 mcg/0.2 mL dosage, for intramuscular use

Added CPT Codes for 2026

Speciality	CPT Code	Description
Pathology and Laboratory		
Pathology and Laboratory	81354	Cytogenomic (genome-wide) analysis for constitutional chromosomal abnormalities; interrogation of structural and copy number variants, optical genome mapping (OGM)
Pathology and Laboratory	81524	Oncology (central nervous system tumor), DNA methylation analysis of at least 10,000 methylation sites, utilizing DNA extracted from formalin-fixed tumor tissue, algorithm(s) reported as probability of matching a reference tumor family and class, and MGMT (O-6-methylguanine-DNA methyltransferase) promoter methylation status, if performed
Pathology and Laboratory	87182	Susceptibility studies, antimicrobial agent; carbapenemase enzyme detection (eg, Klebsiella pneumoniae carbapenemase [KPC], New Delhi metallo-beta-lactamase [NDM], Verona integron-encoded metallo-beta-lactamase [VIM]), multiplex immunoassay, qualitative, per isolate
Pathology and Laboratory	87183	Susceptibility studies, antimicrobial agent; carbapenem resistance genes (eg, blaKPC, blaNDM, blaVIM, blaOXA-48, blaIMP), amplified probe technique, per isolate
Pathology and Laboratory	87494	Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia trachomatis and Neisseria gonorrhoeae, multiplex amplified probe technique
Pathology and Laboratory	87627	Infectious agent detection by nucleic acid (DNA or RNA); joint space pathogens and drug resistance genes, multiplex amplified probe technique, 26 or more targets
Pathology and Laboratory	87812	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) and influenza virus types A and B
Radiology		
Radiology	70471	Computed tomographic angiography (CTA), head and neck, with contrast material(s), including noncontrast images, when performed, and image postprocessing
Radiology	70472	Computed tomographic (CT) cerebral perfusion analysis with contrast material(s), including image postprocessing performed with concurrent CT or CT angiography of the same anatomy (List separately in addition to code for primary procedure)
Radiology	70473	Computed tomographic (CT) cerebral perfusion analysis with contrast material(s), including image postprocessing performed without concurrent CT or CT angiography of the same anatomy
Radiology	75577	Quantification and characterization of coronary atherosclerotic plaque to assess severity of coronary disease, derived from augmentative software analysis of the data set from a coronary computed tomographic angiography, with interpretation and report by a physician or other qualified health care professional
Radiology	77436	Surface radiation therapy; superficial or orthovoltage, treatment planning and simulation-aided field setting
Radiology	77437	Surface radiation therapy; superficial, delivery,
Radiology	77438	Surface radiation therapy; orthovoltage, delivery, >150-500 kV, per fraction
Radiology	77439	Surface radiation therapy; superficial or orthovoltage, image guidance, ultrasound for placement of radiation therapy fields for treatment of cutaneous tumors, per course of treatment (List separately in addition to code for primary procedure)
Surgery		
Surgery	27458	Osteotomy(ies), femur, unilateral, with insertion of an externally controlled intramedullary lengthening device, including iliotibial band release when performed, imaging, alignment assessments, computations of adjustment schedules, and management of the intramedullary lengthening device
Surgery	27713	Osteotomy(ies), tibia, including fibula when performed, unilateral, with insertion of an externally controlled intramedullary lengthening device, including imaging, alignment assessments, computations of adjustment schedules, and management of the intramedullary lengthening device
Surgery	33882	Endovascular repair of the thoracic aorta by deployment of a branched endograft multipiece system involving an aorto-aortic tube device with a fenestration for the left subclavian artery stent graft(s) and all aortic tube endograft extension(s) placed from the level of the left common carotid artery to the celiac artery, including pre-procedure sizing and device selection, all target zone angioplasty, all nonselective catheterization(s) and left subclavian artery selective catheterization(s), and all associated radiological supervision and interpretation
Surgery	35602	Bypass graft, with other than vein; carotid-contralateral carotid
Surgery	37254	Revascularization, endovascular, open or percutaneous, iliac vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; straightforward lesion, initial vessel
Surgery	37255	Revascularization, endovascular, open or percutaneous, iliac vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; straightforward lesion, each additional vessel (List separately in addition to code for primary procedure)
Surgery	37256	Revascularization, endovascular, open or percutaneous, iliac vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; complex lesion, initial vessel

Added CPT Codes for 2026

[illegible]

Added CPT Codes for 2026

[illegible]

Added CPT Codes for 2026

[illegible]

Added CPT Codes for 2026

Speciality	CPT Code	Description
Surgery	43889	Gastric restrictive procedure, transoral, endoscopic sleeve gastropasty (ESG), including argon plasma coagulation, when performed
Surgery	47384	Ablation, irreversible electroporation, liver, 1 or more tumors, including imaging guidance, percutaneous
Surgery	52443	Cystourethroscopy with initial transurethral anterior prostate commissurotomy with a nondrug-coated balloon catheter followed by therapeutic drug delivery into the prostate by a drug-coated balloon catheter, including transrectal ultrasound and fluoroscopy, when performed
Surgery	52597	Transurethral robotic-assisted waterjet resection of prostate, including intraoperative planning, ultrasound guidance, control of postoperative bleeding, complete, including vasectomy, meatotomy, cystourethroscopy, urethral calibration and/or dilation, and internal urethrotomy, when performed
Surgery	55707	Biopsy, prostate, transrectal, ultrasound-guided (ie, sextant, ultrasound-localized discrete lesion[s])
Surgery	55708	Biopsy, prostate, transrectal, ultrasound-guided (ie, sextant) with MRI-fusion-guidance, first targeted lesion
Surgery	55709	Biopsy, prostate, transperineal, ultrasound-guided (ie, sextant, ultrasound-localized discrete lesion[s])
Surgery	55710	Biopsy, prostate, transperineal, ultrasound-guided (ie, sextant) with MRI-fusion-guidance biopsy, first targeted lesion
Surgery	55711	Biopsy, prostate, transrectal, MRI-ultrasound-fusion guided, targeted lesion(s) only, first targeted lesion
Surgery	55712	Biopsy, prostate, transperineal, MRI-ultrasound-fusion guided, targeted lesion(s) only, first targeted lesion
Surgery	55713	Biopsy, prostate, in-bore CT- or MRI-guided (ie, sextant), with biopsy of additional targeted lesion(s), first targeted lesion
Surgery	55714	Biopsy, prostate, in-bore CT- or MRI-guided targeted lesion(s) only, first targeted lesion
Surgery	55715	Biopsy, prostate, each additional, MRI-ultrasound fusion or in-bore CT- or MRI-guided targeted lesion (List separately in addition to code for primary procedure)
Surgery	55868	Laparoscopy, surgical prostatectomy, retropubic radical, including nerve sparing, includes robotic assistance, when performed; with lymph node biopsy(ies) (limited pelvic lymphadenectomy)
Surgery	55869	Laparoscopy, surgical prostatectomy, retropubic radical, including nerve sparing, includes robotic assistance, when performed; with bilateral pelvic lymphadenectomy, including external iliac, hypogastric, and obturator nodes
Surgery	55877	Ablation, irreversible electroporation, prostate, 1 or more tumors, including imaging guidance, percutaneous
Surgery	62330	Decompression, percutaneous, with partial removal of the ligamentum flavum, including laminotomy for access, epidurography, and imaging guidance (ie, CT or fluoroscopy), bilateral; one interspace, lumbar
Surgery	62331	Decompression, percutaneous, with partial removal of the ligamentum flavum, including laminotomy for access, epidurography, and imaging guidance (ie, CT or fluoroscopy), bilateral; additional interspace(s), lumbar (List separately in addition to code for primary procedure)
Surgery	63032	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc; with repair of annular defect by implantation of bone-anchored annular closure device, including all imaging guidance, 1 interspace, lumbar (List separately in addition to code for primary procedure)
Surgery	64567	Percutaneous electrical nerve field stimulation, cranial nerves, without implantation
Surgery	64654	Initial open implantation of baroreflex activation therapy (BAT) modulation system, including lead placement onto the carotid sinus, lead tunnelling, connection to a pulse generator placed in a distant subcutaneous pocket (ie, total system), and intraoperative interrogation and programming
Surgery	64655	Revision or replacement of baroreflex activation therapy (BAT) modulation system, with intraoperative interrogation and programming; lead only
Surgery	64656	Revision or replacement of baroreflex activation therapy (BAT) modulation system, with intraoperative interrogation and programming; pulse generator only
Surgery	64657	Removal of baroreflex activation therapy (BAT) modulation system; total system, including lead and pulse generator
Surgery	64658	Removal of baroreflex activation therapy (BAT) modulation system; lead only
Surgery	64659	Removal of baroreflex activation therapy (BAT) modulation system; pulse generator only
Surgery	64728	Decompression; median nerve at the carpal tunnel, percutaneous, with intracarpal tunnel balloon dilation, including ultrasound guidance

Revised CPT Codes for 2026

Specialty	CPT Code	2026 Description	2025 Description
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Proprietary Laboratory Analyses

Proprietary Laboratory Analyses	0095U	Eosinophilic esophagitis, 2 protein biomarkers (Eotaxin-3 [CCL26 {C-C motif chemokine ligand 26}] and Major Basic Protein [PRG2 {proteoglycan 2, pro eosinophil major basic protein}]), enzyme-linked immunosorbent assays (ELISA), specimen obtained by esophageal string test device, algorithm reported as probability of active or inactive eosinophilic esophagitis	Eosinophilic esophagitis, 2 protein biomarkers (Eotaxin-3 [CCL26 {C-C motif chemokine ligand 26}] and Major Basic Protein [PRG2 {proteoglycan 2, pro eosinophil major basic protein}]), enzyme-linked immunosorbent assays (ELISA), specimen obtained by esophageal string test device, algorithm reported as probability of active or inactive eosinophilic esophagitis
Proprietary Laboratory Analyses	0285U	Oncology, disease progression and response monitoring to radiation, chemotherapy, or other systematic cancer treatments, cell-free DNA, quantitative branched chain DNA amplification, plasma, reported in ng/mL	Oncology, disease progression and response monitoring to radiation, chemotherapy, or other systematic cancer treatments, cell-free DNA, quantitative branched chain DNA amplification, plasma, reported in ng/mL
Proprietary Laboratory Analyses	0365U	Oncology (bladder), 10 protein biomarkers (A1AT, ANG, APOE, CA9, IL8, MMP9, MMP10, PAI1, SDC1, and VEGFA) by immunoassays, urine, diagnostic algorithm, including patient's age, race, and gender, reported as a probability of harboring urothelial cancer	Oncology (bladder), 10 protein biomarkers (A1AT, ANG, APOE, CA9, IL8, MMP9, MMP10, PAI1, SDC1 and VEGFA), by immunoassays, urine, diagnostic algorithm, including patient's age, race and gender, reported as a probability of harboring urothelial cancer

Category III

Category III	0274T	Percutaneous laminotomy/laminectomy (interlaminar approach) for decompression of neural elements, (with or without ligamentous resection, discectomy, facetectomy and/or foraminotomy), any method, under indirect image guidance (eg, fluoroscopic, CT), single or multiple levels, unilateral or bilateral, cervical or thoracic	Percutaneous laminotomy/laminectomy (interlaminar approach) for decompression of neural elements, (with or without ligamentous resection, discectomy, facetectomy and/or foraminotomy), any method, under indirect image guidance (eg, fluoroscopic, CT), single or multiple levels, unilateral or bilateral; cervical or thoracic
Category III	0598T	Real-time fluorescence wound imaging with clinical darkness, to identify location of bacterial wound pathogens and measure wound size, per session; first anatomic site (eg, lower extremity, right leg)	Noncontact real-time fluorescence wound imaging, for bacterial presence, location, and load, per session; first anatomic site (eg, lower extremity)
Category III	0599T	Real-time fluorescence wound imaging with clinical darkness, to identify location of bacterial wound pathogens and measure wound size, per session; each additional anatomic site (eg, upper extremity, left leg) (List separately in addition to code for primary procedure)	Noncontact real-time fluorescence wound imaging, for bacterial presence, location, and load, per session; each additional anatomic site (eg, upper extremity) (List separately in addition to code for primary procedure)
Category III	0600T	Ablation, irreversible electroporation; 1 or more tumors per organ, other than liver or prostate, including imaging guidance, when performed, percutaneous	Ablation, irreversible electroporation; 1 or more tumors per organ, including imaging guidance, when performed, percutaneous

Surgery

Surgery	10040	Extraction (eg, marsupialization, opening or removal of multiple milia, comedones, cysts, pustules)	Acne surgery (eg, marsupialization, opening or removal of multiple milia, comedones, cysts, pustules)
Surgery	27278	Arthrodesis, sacroiliac joint, percutaneous or minimally invasive, with image guidance, includes obtaining bone graft when performed, unilateral; placement of intra-articular device(s), without cortical piercing	Arthrodesis, sacroiliac joint, percutaneous, with image guidance, including placement of intra-articular implant(s) (eg, bone allograft[s], synthetic device[s]), without placement of transfixation device
Surgery	27279	Arthrodesis, sacroiliac joint, percutaneous or minimally invasive, with image guidance, includes obtaining bone graft when performed, unilateral; placement of transarticular device(s) and/or intra-articular device(s) piercing the lateral or medial cortices of the ilium and the lateral cortex of the sacrum	Arthrodesis, sacroiliac joint, percutaneous or minimally invasive (indirect visualization), with image guidance, includes obtaining bone graft when performed, and placement of transfixation device
Surgery	33880	Endovascular repair of thoracic aorta, including pre-procedure sizing and device selection, nonselective catheterization(s), all associated radiological supervision and interpretation; by deployment of an aorto-aortic tube endograft covering the left subclavian artery and all aortic tube endograft extension(s) proximally in the aortic arch and ascending aorta and distally to the celiac artery, when performed	Endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); involving coverage of left subclavian artery origin, initial endoprosthesis plus descending thoracic aortic extension(s), if required, to level of celiac artery origin
Surgery	33881	Endovascular repair of thoracic aorta, including pre-procedure sizing and device selection, nonselective catheterization(s), all associated radiological supervision and interpretation; by deployment of an aorto-aortic tube endograft not involving coverage of the left subclavian artery origin and all endograft extension(s) placed from the level of the left subclavian carotid artery to the celiac artery	Endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); not involving coverage of left subclavian artery origin, initial endoprosthesis plus descending thoracic aortic extension(s), if required, to level of celiac artery origin

Revised CPT Codes for 2026

Speciality	CPT Code	2026 Description	2025 Description
Surgery	33883	Delayed placement of proximal extension prosthesis(es) not involving coverage of the left subclavian artery origin, after endovascular repair of the thoracic aorta, including pre-procedure sizing and device selection, nonselective catheterization(s), all associated radiological supervision and interpretation, and treatment zone angioplasty/stenting, when performed	Placement of proximal extension prosthesis for endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); initial extension
Surgery	33886	Delayed placement of distal extension prosthesis(es) from the level of the left subclavian artery to the celiac artery, after endovascular repair of descending thoracic aorta, including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation	Placement of distal extension prosthesis(s) delayed after endovascular repair of descending thoracic aorta
Surgery	55705	Biopsy, prostate, any approach, nonimaging-guided	Biopsy, prostate; incisional, any approach
Surgery	55866	Laparoscopy, surgical prostatectomy, retropubic radical, including nerve sparing, includes robotic assistance, when performed;	Laparoscopy, surgical prostatectomy, retropubic radical, including nerve sparing, includes robotic assistance, when performed
Surgery	61624	Transcatheter permanent occlusion or embolization (eg, for tumor destruction, to achieve hemostasis, to occlude a vascular malformation), including all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention, percutaneous, any method; central nervous system (intracranial, spinal cord)	Transcatheter permanent occlusion or embolization (eg, for tumor destruction, to achieve hemostasis, to occlude a vascular malformation), percutaneous, any method; central nervous system (intracranial, spinal cord)
Surgery	61626	Transcatheter permanent occlusion or embolization (eg, for tumor destruction, to achieve hemostasis, to occlude a vascular malformation), including all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention, percutaneous, any method; non-central nervous system, head or neck (extracranial, brachiocephalic branch)	Transcatheter permanent occlusion or embolization (eg, for tumor destruction, to achieve hemostasis, to occlude a vascular malformation), percutaneous, any method; non-central nervous system, head or neck (extracranial, brachiocephalic branch)
Surgery	62287	Decompression, percutaneous, of nucleus pulposus of intervertebral disc, any method utilizing needle-based technique to remove disc material under fluoroscopic imaging or other form of indirect visualization, with discography and/or epidural injection(s) at the treated level(s), when performed, single or multiple levels, lumbar	Decompression procedure, percutaneous, of nucleus pulposus of intervertebral disc, any method utilizing needle based technique to remove disc material under fluoroscopic imaging or other form of indirect visualization, with discography and/or epidural injection(s) at the treated level(s), when performed, single or multiple levels, lumbar

Radiology

Radiology	77402	Radiation treatment delivery; Level 1 (eg, single-electron field, multiple-electron fields, or 2D photons), including imaging guidance, when performed	Radiation treatment delivery, >=1 MeV; simple
Radiology	77407	Radiation treatment delivery; Level 2, single-isocenter (eg, 3D or IMRT), photons, including imaging guidance, when performed	Radiation treatment delivery, >=1 MeV; intermediate
Radiology	77412	Radiation treatment delivery; Level 3, multiple isocenters with photon therapy (eg, 2D, 3D, or IMRT) or a single-isocenter photon therapy (eg, 3D or IMRT) with active motion management, or total skin electrons, or mixed-electron/photon field(s), including imaging guidance, when performed	Radiation treatment delivery, >=1 MeV; complex

Pathology and Laboratory

Pathology and Laboratory	83015	Heavy metal (eg, antimony, arsenic, barium, beryllium, bismuth, gadolinium, mercury); qualitative, any number of analytes	Heavy metal (eg, arsenic, barium, beryllium, bismuth, antimony, mercury); qualitative, any number of analytes
Pathology and Laboratory	83018	Heavy metal (eg, antimony, arsenic, barium, beryllium, bismuth, gadolinium, mercury); quantitative, each, not elsewhere specified	Heavy metal (eg, arsenic, barium, beryllium, bismuth, antimony, mercury); quantitative, each, not elsewhere specified

Medicine Services and Procedures

Medicine Services and Procedures	90480	Immunization administration by intramuscular injection, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine; first or only component of each vaccine administered	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, single dose
Medicine Services and Procedures	92284	Diagnostic dark adaptation examination (eg, rod and cone sensitivities, rod-cone breakpoint), with interpretation and report	Diagnostic dark adaptation examination with interpretation and report
Medicine Services and Procedures	92920	Percutaneous transluminal coronary angioplasty, single major coronary artery and/or its branch(es)	Percutaneous transluminal coronary angioplasty; single major coronary artery or branch
Medicine Services and Procedures	92924	Percutaneous transluminal coronary atherectomy, with coronary angioplasty when performed, single major coronary artery and/or its branch(es)	Percutaneous transluminal coronary atherectomy, with coronary angioplasty when performed; single major coronary artery or branch

Revised CPT Codes for 2026

Specialty	CPT Code	2026 Description	2024 Description
Medicine Services and Procedures	92928	Percutaneous transcatheter placement of intracoronary stent(s), with coronary angioplasty when performed, single major coronary artery and/or its branch(es); 1 lesion involving 1 or more coronary segments	Percutaneous transcatheter placement of intracoronary stent(s), with coronary angioplasty when performed; single major coronary artery or branch
Medicine Services and Procedures	92933	Percutaneous transluminal coronary atherectomy, with intracoronary stent, with coronary angioplasty when performed, single major coronary artery and/or its branch(es)	Percutaneous transluminal coronary atherectomy, with intracoronary stent, with coronary angioplasty when performed; single major coronary artery or branch
Medicine Services and Procedures	92937	Percutaneous transluminal revascularization of or through coronary artery bypass graft (internal mammary, free arterial, venous), any combination of intracoronary stent, atherectomy and angioplasty, including distal protection when performed, single major coronary artery and/or its branches	Percutaneous transluminal revascularization of or through coronary artery bypass graft (internal mammary, free arterial, venous), any combination of intracoronary stent, atherectomy and angioplasty, including distal protection when performed; single vessel
Medicine Services and Procedures	92941	Percutaneous transluminal revascularization of acute total/subtotal occlusion during acute myocardial infarction, any combination of intracoronary stent, atherectomy and angioplasty, including aspiration thrombectomy when performed, single major coronary artery and/or its branches or single bypass graft and/or its subtended branches	Percutaneous transluminal revascularization of acute total/subtotal occlusion during acute myocardial infarction, coronary artery or coronary artery bypass graft, any combination of intracoronary stent, atherectomy and angioplasty, including aspiration thrombectomy when performed, single vessel
Medicine Services and Procedures	92943	Percutaneous transluminal revascularization of chronic total occlusion, single coronary artery, coronary artery branch, or coronary artery bypass graft, and/or subtended major coronary artery branches of the bypass graft, any combination of intracoronary stent, atherectomy and angioplasty; antegrade approach	Percutaneous transluminal revascularization of chronic total occlusion, coronary artery, coronary artery branch, or coronary artery bypass graft, any combination of intracoronary stent, atherectomy and angioplasty; single vessel
Medicine Services and Procedures	92973	Percutaneous transluminal coronary mechanical aspiration thrombectomy (List separately in addition to code for primary procedure)	Percutaneous transluminal coronary thrombectomy mechanical (List separately in addition to code for primary procedure)
Medicine Services and Procedures	93571	Intravascular Doppler velocity and/or pressure derived coronary flow reserve measurement (coronary vessel or graft) during coronary angiography including pharmacologically induced stress, when performed; initial vessel (List separately in addition to code for primary procedure)	Intravascular Doppler velocity and/or pressure derived coronary flow reserve measurement (coronary vessel or graft) during coronary angiography including pharmacologically induced stress; initial vessel (List separately in addition to code for primary procedure)
Medicine Services and Procedures	93572	Intravascular Doppler velocity and/or pressure derived coronary flow reserve measurement (coronary vessel or graft) during coronary angiography including pharmacologically induced stress, when performed; each additional vessel (List separately in addition to code for primary procedure)	Intravascular Doppler velocity and/or pressure derived coronary flow reserve measurement (coronary vessel or graft) during coronary angiography including pharmacologically induced stress; each additional vessel (List separately in addition to code for primary procedure)
Medicine Services and Procedures	98976	Remote therapeutic monitoring (eg, therapy adherence, therapy response, digital therapeutic intervention); device(s) supply for data access or data transmissions to support monitoring of respiratory system, 16-30 days in a 30-day period	Remote therapeutic monitoring (eg, therapy adherence, therapy response, digital therapeutic intervention); device(s) supply for data access or data transmissions to support monitoring of respiratory system, each 30 days
Medicine Services and Procedures	98977	Remote therapeutic monitoring (eg, therapy adherence, therapy response, digital therapeutic intervention); device(s) supply for data access or data transmissions to support monitoring of musculoskeletal system, 16-30 days in a 30-day period	Remote therapeutic monitoring (eg, therapy adherence, therapy response, digital therapeutic intervention); device(s) supply for data access or data transmissions to support monitoring of musculoskeletal system, each 30 days
Medicine Services and Procedures	98978	Remote therapeutic monitoring (eg, therapy adherence, therapy response, digital therapeutic intervention); device(s) supply for data access or data transmissions to support monitoring of cognitive behavioral therapy, 16-30 days in a 30-day period	Remote therapeutic monitoring (eg, therapy adherence, therapy response, digital therapeutic intervention); device(s) supply for data access or data transmissions to support monitoring of cognitive behavioral therapy, each 30 days
Medicine Services and Procedures	98980	Remote therapeutic monitoring treatment management services, physician or other qualified health care professional time in a calendar month requiring at least 1 real-time interactive communication with the patient or caregiver during the calendar month; first 20 minutes	Remote therapeutic monitoring treatment management services, physician or other qualified health care professional time in a calendar month requiring at least one interactive communication with the patient or caregiver during the calendar month; first 20 minutes
Medicine Services and Procedures	98981	Remote therapeutic monitoring treatment management services, physician or other qualified health care professional time in a calendar month requiring at least 1 real-time interactive communication with the patient or caregiver during the calendar month; each additional 20 minutes (List separately in addition to code for primary procedure)	Remote therapeutic monitoring treatment management services, physician or other qualified health care professional time in a calendar month requiring at least one interactive communication with the patient or caregiver during the calendar month; each additional 20 minutes (List separately in addition to code for primary procedure)
Medicine Services and Procedures	99453	Remote monitoring of physiologic parameter(s) (eg, weight, blood pressure, pulse oximetry, respiratory flow rate); initial set-up and patient education on use of equipment	Remote monitoring of physiologic parameter(s) (eg, weight, blood pressure, pulse oximetry, respiratory flow rate), initial; set-up and patient education on use of equipment

Evaluation and Management

Medicine Services and Procedures	99454	Remote monitoring of physiologic parameter(s) (eg, weight, blood pressure, pulse oximetry, respiratory flow rate); device(s) supply with daily recording(s) or programmed alert(s) transmission, 16-30 days in a 30-day period	Remote monitoring of physiologic parameter(s) (eg, weight, blood pressure, pulse oximetry, respiratory flow rate), initial; device(s) supply with daily recording(s) or programmed alert(s) transmission, each 30 days
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Revised CPT Codes for 2026

Speciality	CPT Code	2026 Description	2024 Description
Medicine Services and Procedures	99457	Remote physiologic monitoring treatment management services, clinical staff/physician/other qualified health care professional time in a calendar month requiring 1 real-time interactive communication with the patient/caregiver during the calendar month; first 20 minutes	Remote physiologic monitoring treatment management services, clinical staff/physician/other qualified health care professional time in a calendar month requiring interactive communication with the patient/caregiver during the month; first 20 minutes
Medicine Services and Procedures	99458	Remote physiologic monitoring treatment management services, clinical staff/physician/other qualified health care professional time in a calendar month requiring 1 real-time interactive communication with the patient/caregiver during the calendar month; each additional 20 minutes (List separately in addition to code for primary procedure)	Remote physiologic monitoring treatment management services, clinical staff/physician/other qualified health care professional time in a calendar month requiring interactive communication with the patient/caregiver during the month; each additional 20 minutes (List separately in addition to code for primary procedure)

Deleted CPT Codes for 2026

Speciality	CPT Code	Description
Proprietary Laboratory Analyses		
Proprietary Laboratory Analyses	0240U	Infectious disease (viral respiratory tract infection), pathogen-specific RNA, 3 targets (severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2], influenza A, influenza B), upper respiratory specimen, each pathogen reported as detected or not detected
Proprietary Laboratory Analyses	0241U	Infectious disease (viral respiratory tract infection), pathogen-specific RNA, 4 targets (severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2], influenza A, influenza B, respiratory syncytial virus [RSV]), upper respiratory specimen, each pathogen reported as detected or not detected
Proprietary Laboratory Analyses	0346U	Beta amyloid, Aβ40 and Aβ42 by liquid chromatography with tandem mass spectrometry (LC-MS/MS), ratio, plasma
Proprietary Laboratory Analyses	0369U	Infectious agent detection by nucleic acid (DNA and RNA), gastrointestinal pathogens, 31 bacterial, viral, and parasitic organisms and identification of 21 associated antibiotic-resistance genes, multiplex amplified probe technique
Proprietary Laboratory Analyses	0370U	Infectious agent detection by nucleic acid (DNA and RNA), surgical wound pathogens, 34 microorganisms and identification of 21 associated antibiotic-resistance genes, multiplex amplified probe technique, wound swab
Proprietary Laboratory Analyses	0373U	Infectious agent detection by nucleic acid (DNA and RNA), respiratory tract infection, 17 bacteria, 8 fungus, 13 virus, and 16 antibiotic-resistance genes, multiplex amplified probe technique, upper or lower respiratory specimen
Proprietary Laboratory Analyses	0374U	Infectious agent detection by nucleic acid (DNA or RNA), genitourinary pathogens, identification of 21 bacterial and fungal organisms and identification of 21 associated antibiotic-resistance genes, multiplex amplified probe technique, urine
Proprietary Laboratory Analyses	0380U	Drug metabolism (adverse drug reactions and drug response), targeted sequence analysis, 20 gene variants and CYP2D6 deletion or duplication analysis with reported genotype and phenotype
Proprietary Laboratory Analyses	0428U	Oncology (breast), targeted hybrid-capture genomic sequence analysis panel, circulating tumor DNA (ctDNA) analysis of 56 or more genes, interrogation for sequence variants, gene copy number amplifications, gene rearrangements, microsatellite instability, and tumor mutation burden
Proprietary Laboratory Analyses	0448U	Oncology (lung and colon cancer), DNA, qualitative, next-generation sequencing detection of single-nucleotide variants and deletions in EGFR and KRAS genes, formalin-fixed paraffin-embedded (FFPE) solid tumor samples, reported as presence or absence of targeted mutation(s), with recommended therapeutic options
Proprietary Laboratory Analyses	0450U	Oncology (multiple myeloma), liquid chromatography with tandem mass spectrometry (LC-MS/MS), monoclonal paraprotein sequencing analysis, serum, results reported as baseline presence or absence of detectable clonotypic peptides
Proprietary Laboratory Analyses	0451U	Oncology (multiple myeloma), LC-MS/MS, peptide ion quantification, serum, results compared with baseline to determine monoclonal paraprotein abundance
Proprietary Laboratory Analyses	0456U	Autoimmune (rheumatoid arthritis), next-generation sequencing (NGS), gene expression testing of 19 genes, whole blood, with analysis of anti-cyclic citrullinated peptides (CCP) levels, combined with sex, patient global assessment, and body mass index (BMI), algorithm reported as a score that predicts nonresponse to tumor necrosis factor inhibitor (TNFi) therapy

Category III

Category III	0042T	Cerebral perfusion analysis using computed tomography with contrast administration, including post-processing of parametric maps with determination of cerebral blood flow, cerebral blood volume, and mean transit time
Category III	0266T	Implantation or replacement of carotid sinus baroreflex activation device; total system (includes generator placement, unilateral or bilateral lead placement, intra-operative interrogation, programming, and repositioning, when performed)
Category III	0267T	Implantation or replacement of carotid sinus baroreflex activation device; lead only, unilateral (includes intra-operative interrogation, programming, and repositioning, when performed)
Category III	0268T	Implantation or replacement of carotid sinus baroreflex activation device; pulse generator only (includes intra-operative interrogation, programming, and repositioning, when performed)
Category III	0269T	Revision or removal of carotid sinus baroreflex activation device; total system (includes generator placement, unilateral or bilateral lead placement, intra-operative interrogation, programming, and repositioning, when performed)
Category III	0270T	Revision or removal of carotid sinus baroreflex activation device; lead only, unilateral (includes intra-operative interrogation, programming, and repositioning, when performed)
Category III	0271T	Revision or removal of carotid sinus baroreflex activation device; pulse generator only (includes intra-operative interrogation, programming, and repositioning, when performed)
Category III	0272T	Interrogation device evaluation (in person), carotid sinus baroreflex activation system, including telemetric iterative communication with the implantable device to monitor device diagnostics and programmed therapy values, with interpretation and report (eg, battery status, lead impedance, pulse amplitude, pulse width, therapy frequency, pathway mode, burst mode, therapy start/stop times each day)
Category III	0273T	Interrogation device evaluation (in person), carotid sinus baroreflex activation system, including telemetric iterative communication with the implantable device to monitor device diagnostics and programmed therapy values, with interpretation and report (eg, battery status, lead impedance, pulse amplitude, pulse width, therapy frequency, pathway mode, burst mode, therapy start/stop times each day); with programming
Category III	0275T	Percutaneous laminotomy/laminectomy (interlaminar approach) for decompression of neural elements, (with or without ligamentous resection, discectomy, facetectomy and/or foraminotomy), any method, under indirect image guidance (eg, fluoroscopic, ct), single or multiple levels, unilateral or bilateral; lumbar
Category III	0394T	High dose rate electronic brachytherapy, skin surface application, per fraction, includes basic dosimetry, when performed
Category III	0421T	Transurethral waterjet ablation of prostate, including control of post-operative bleeding, including ultrasound guidance, complete (vasectomy, meatotomy, cystourethroscopy, urethral calibration and/or dilation, and internal urethrotomy are included when performed)

Deleted CPT Codes for 2026

Speciality	CPT Code	Description
Category III	0619T	Cystourethroscopy with transurethral anterior prostate commissurotomy and drug delivery, including transrectal ultrasound and fluoroscopy, when performed
Category III	0623T	Automated quantification and characterization of coronary atherosclerotic plaque to assess severity of coronary disease, using data from coronary computed tomographic angiography; data preparation and transmission, computerized analysis of data, with review of computerized analysis output to reconcile discordant data, interpretation and report
Category III	0624T	Automated quantification and characterization of coronary atherosclerotic plaque to assess severity of coronary disease, using data from coronary computed tomographic angiography; data preparation and transmission
Category III	0625T	Automated quantification and characterization of coronary atherosclerotic plaque to assess severity of coronary disease, using data from coronary computed tomographic angiography; computerized analysis of data from coronary computed tomographic angiography
Category III	0626T	Automated quantification and characterization of coronary atherosclerotic plaque to assess severity of coronary disease, using data from coronary computed tomographic angiography; review of computerized analysis output to reconcile discordant data, interpretation and report
Category III	0631T	Transcutaneous visible light hyperspectral imaging measurement of oxyhemoglobin, deoxyhemoglobin, and tissue oxygenation, with interpretation and report, per extremity
Category III	0662T	Scalp cooling, mechanical; initial measurement and calibration of cap
Category III	0663T	Scalp cooling, mechanical; placement of device, monitoring, and removal of device (list separately in addition to code for primary procedure)
Category III	0720T	Percutaneous electrical nerve field stimulation, cranial nerves, without implantation

Medicine Services and Procedures

Medicine Services and Procedures	91120	Rectal sensation, tone, and compliance test (ie, response to graded balloon distention)
Medicine Services and Procedures	91122	Anorectal manometry
Medicine Services and Procedures	92590	Hearing aid examination and selection; monaural
Medicine Services and Procedures	92591	Hearing aid examination and selection; binaural
Medicine Services and Procedures	92592	Hearing aid check; monaural
Medicine Services and Procedures	92593	Hearing aid check; binaural
Medicine Services and Procedures	92594	Electroacoustic evaluation for hearing aid; monaural
Medicine Services and Procedures	92595	Electroacoustic evaluation for hearing aid; binaural
Medicine Services and Procedures	92921	Percutaneous transluminal coronary angioplasty; each additional branch of a major coronary artery (list separately in addition to code for primary procedure)
Medicine Services and Procedures	92925	Percutaneous transluminal coronary atherectomy, with coronary angioplasty when performed; each additional branch of a major coronary artery (list separately in addition to code for primary procedure)
Medicine Services and Procedures	92929	Percutaneous transcatheter placement of intracoronary stent(s), with coronary angioplasty when performed; each additional branch of a major coronary artery (list separately in addition to code for primary procedure)
Medicine Services and Procedures	92934	Percutaneous transluminal coronary atherectomy, with intracoronary stent, with coronary angioplasty when performed; each additional branch of a major coronary artery (list separately in addition to code for primary procedure)
Medicine Services and Procedures	92938	Percutaneous transluminal revascularization of or through coronary artery bypass graft (internal mammary, free arterial, venous), any combination of intracoronary stent, atherectomy and angioplasty, including distal protection when performed; each additional branch subtended by the bypass graft (list separately in addition to code for primary procedure)
Medicine Services and Procedures	92944	Percutaneous transluminal revascularization of chronic total occlusion, coronary artery, coronary artery branch, or coronary artery bypass graft, any combination of intracoronary stent, atherectomy and angioplasty; each additional coronary artery, coronary artery branch, or bypass graft (list separately in addition to code for primary procedure)
Medicine Services and Procedures	92975	Thrombolysis, coronary; by intracoronary infusion, including selective coronary angiography
Medicine Services and Procedures	92977	Thrombolysis, coronary; by intravenous infusion
Medicine Services and Procedures	94662	Continuous negative pressure ventilation (cnp), initiation and management

Radiology

Radiology	75842	Venography, adrenal, bilateral, selective, radiological supervision and interpretation
Radiology	75956	Endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); involving coverage of left subclavian artery origin, initial endoprosthesis plus descending thoracic aortic extension(s), if required, to level of celiac artery origin, radiological supervision and interpretation

Deleted CPT Codes for 2026

Speciality	CPT Code	Description
Radiology	75957	Endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); not involving coverage of left subclavian artery origin, initial endoprosthesis plus descending thoracic aortic extension(s), if required, to level of celiac artery origin, radiological supervision and interpretation
Radiology	75958	Placement of proximal extension prosthesis for endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption), radiological supervision and interpretation
Radiology	75959	Placement of distal extension prosthesis(s) (delayed) after endovascular repair of descending thoracic aorta, as needed, to level of celiac origin, radiological supervision and interpretation
Radiology	77014	Computed tomography guidance for placement of radiation therapy fields
Radiology	77385	Intensity modulated radiation treatment delivery (imrt), includes guidance and tracking, when performed; simple
Radiology	77386	Intensity modulated radiation treatment delivery (imrt), includes guidance and tracking, when performed; complex
Radiology	77401	Radiation treatment delivery, superficial and/or ortho voltage, per day

Surgery

Surgery	27445	Arthroplasty, knee, hinge prosthesis (eg, walldius type)
Surgery	27468	Osteoplasty, femur; combined, lengthening and shortening with femoral segment transfer
Surgery	33884	Placement of proximal extension prosthesis for endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); each additional proximal extension (list separately in addition to code for primary procedure)
Surgery	33889	Open subclavian to carotid artery transposition performed in conjunction with endovascular repair of descending thoracic aorta, by neck incision, unilateral
Surgery	33891	Bypass graft, with other than vein, transcervical retropharyngeal carotid-carotid, performed in conjunction with endovascular repair of descending thoracic aorta, by neck incision
Surgery	37220	Revascularization, endovascular, open or percutaneous, iliac artery, unilateral, initial vessel; with transluminal angioplasty
Surgery	37221	Revascularization, endovascular, open or percutaneous, iliac artery, unilateral, initial vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed
Surgery	37222	Revascularization, endovascular, open or percutaneous, iliac artery, each additional ipsilateral iliac vessel; with transluminal angioplasty (list separately in addition to code for primary procedure)
Surgery	37223	Revascularization, endovascular, open or percutaneous, iliac artery, each additional ipsilateral iliac vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed (list separately in addition to code for primary procedure)
Surgery	37224	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal angioplasty
Surgery	37225	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with atherectomy, includes angioplasty within the same vessel, when performed
Surgery	37226	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed
Surgery	37227	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when performed
Surgery	37228	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal angioplasty
Surgery	37229	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with atherectomy, includes angioplasty within the same vessel, when performed
Surgery	37230	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed
Surgery	37231	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when performed
Surgery	37232	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery, unilateral, each additional vessel; with transluminal angioplasty (list separately in addition to code for primary procedure)
Surgery	37233	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery, unilateral, each additional vessel; with atherectomy, includes angioplasty within the same vessel, when performed (list separately in addition to code for primary procedure)
Surgery	37234	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery, unilateral, each additional vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed (list separately in addition to code for primary procedure)
Surgery	37235	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery, unilateral, each additional vessel; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when performed (list separately in addition to code for primary procedure)
Surgery	37500	Vascular endoscopy, surgical, with ligation of perforator veins, subfascial (seps)
Surgery	52647	Laser coagulation of prostate, including control of postoperative bleeding, complete (vasectomy, meatotomy, cystourethroscopy, urethral calibration and/or dilation, and internal urethrotomy are included if performed)
Surgery	55700	Biopsy, prostate; needle or punch, single or multiple, any approach

2026 HCPCS Codes

Below are the 2026 HCPCS code updates. This list includes new HCPCS codes, revised codes and deleted codes.

Added HCPCS Codes for 2026

Speciality	HCPCS Code	Description
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Incontinence Devices and Supplies

Incontinence Devices and Supplies	A4295	Intermittent urinary catheter; straight tip, hydrophilic coating, each
Incontinence Devices and Supplies	A4296	Intermittent urinary catheter; coude (curved) tip, hydrophilic coating, each
Incontinence Devices and Supplies	A4297	Intermittent urinary catheter; hydrophilic coating, with insertion supplies

Assorted Devices, Implants, and Systems

Assorted Devices, Implants, and Systems	C1607	Neurostimulator, integrated (implantable), rechargeable with all implantable and external components including charging system
Assorted Devices, Implants, and Systems	C1608	Prosthesis, total, dual mobility, first carpometacarpal joint (implantable)

Miscellaneous Surgical Procedures

Miscellaneous Surgical Procedures	C7566	Arthrodesis, interphalangeal joints, with or without internal fixation, with autografts (includes obtaining grafts)
Miscellaneous Surgical Procedures	C7567	Bronchoscopy, rigid or flexible, including fluoroscopic guidance when performed, with transbronchial needle aspiration biopsy(s), trachea, main stem and/or lobar bronchus(i), with computer-assisted image-guided navigation
Miscellaneous Surgical Procedures	C7568	Catheter placement in coronary artery(ies) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation, with intravascular doppler velocity and/or pressure derived coronary flow reserve measurement (initial coronary vessel or graft) during coronary angiography including pharmacologically induced stress
Miscellaneous Surgical Procedures	C7569	Percutaneous transluminal coronary angioplasty, single major coronary artery or branch with endoluminal imaging of initial coronary vessel or graft using intravascular ultrasound (ivus) or optical coherence tomography (oct) during diagnostic evaluation and/or therapeutic intervention including imaging supervision, interpretation and report
Miscellaneous Surgical Procedures	C7570	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation with intraprocedural coronary fractional flow reserve (ffr) with 3d functional mapping of color-coded ffr values for the coronary tree, derived from coronary angiogram data, for real-time review and interpretation of possible atherosclerotic stenosis(es) intervention (list separately in addition to code for primary procedure)
Miscellaneous Surgical Procedures	C7571	Percutaneous transluminal coronary angioplasty, single major coronary artery or branch with percutaneous transluminal coronary lithotripsy

Diagnostic and Therapeutic Radiopharmaceuticals

Diagnostic and Therapeutic Radiopharmaceuticals	C9176	Tc-99m from domestically produced non-heu mo-99, [minimum 50 percent], full cost recovery add-on, per study dose
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Miscellaneous Drugs, Biologicals, and Supplies

Miscellaneous Drugs, Biologicals, and Supplies	C9307	Injection, linvoseltamab-gcpt, 1 mg
Miscellaneous Drugs, Biologicals, and Supplies	C9308	Injection, carboplatin (avyxa), 1 mg
Miscellaneous Drugs, Biologicals, and Supplies	J0013	Esketamine, nasal spray, 1 mg
Miscellaneous Drugs, Biologicals, and Supplies	J1073	Testosterone pellet, implant, 75 mg
Miscellaneous Drugs, Biologicals, and Supplies	J3389	Topical administration, prademagene zamikeracel, per treatment
Miscellaneous Drugs, Biologicals, and Supplies	J7299	Intrauterine copper contraceptive (miudella)
Miscellaneous Drugs, Biologicals, and Supplies	J7528	Mycophenolate mofetil, for suspension, oral, 100 mg
Miscellaneous Drugs, Biologicals, and Supplies	J9282	Mitomycin, intravesical instillation, 1 mg

Other Therapeutic Services and Supplies

Other Therapeutic Services and Supplies	C9810	Water circulating motorized cold therapy device (e.g., iceman) including all system components (e.g. pads, console, disposable parts), non-opioid medical device (must be a qualifying medicare non-opioid medical device for post-surgical pain relief in accordance with section 4135 of the caa, 2023)
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Added HCPCS Codes for 2026

Speciality	HCPCS Code	Description
Other Therapeutic Services and Supplies	C9811	Electronic ambulatory infusion pump (e.g. sapphire pump), including all pump components, including disposable components, non-opioid medical device (must be a qualifying medicare non-opioid medical device for post-surgical pain relief in accordance with section 4135 of the caa, 2023)
Other Therapeutic Services and Supplies	C9812	Echogenic nerve block needles (e.g. sonoplex, sonoblock, sonotap), non-opioid medical device (must be a qualifying medicare non-opioid medical device for post-surgical pain relief in accordance with section 4135 of the caa, 2023)
Other Therapeutic Services and Supplies	C9813	Perforated continuous infusion catheter set (e.g. infiltralong), including all components, non-opioid medical device (must be a qualifying medicare non-opioid medical device for post-surgical pain relief in accordance with section 4135 of the caa, 2023)
Other Therapeutic Services and Supplies	C9814	Continuous anesthesia echogenic conduction catheter set (e.g. sonolong), non-opioid medical device (must be a qualifying medicare non-opioid medical device for post-surgical pain relief in accordance with section 4135 of the caa, 2023)
Other Therapeutic Services and Supplies	C9815	Linear peristaltic pain management infusion pump (e.g. cadd-solis ambulatory infusion pump), and all disposable system components, non-opioid medical device (must be a qualifying medicare non-opioid medical device for post-surgical pain relief in accordance with section 4135 of the caa, 2023)
Other Therapeutic Services and Supplies	C9816	Rotary peristaltic infusion pump (e.g., reusable ambit pump) including all disposable system components, reusable non-opioid medical device (must be a qualifying medicare non-opioid medical device for post-surgical pain relief in accordance with section 4135 of the caa, 2023)
Other Therapeutic Services and Supplies	C9817	Electronic cryo-pneumatic compression, pain management system (e.g. game ready grpro 2.1 system), including control unit, anatomically correct wrap(s), and other system component(s), non-opioid medical device (must be a qualifying medicare non-opioid medical device for post-surgical pain relief in accordance with section 4135 of the caa, 2023)

Other Services

Other Services	G0568	Initial psychiatric collaborative care management, in the first calendar month of behavioral health care manager activities, in consultation with a psychiatric consultant, and directed by the treating physician or other qualified health care professional, with the following required elements: outreach to and engagement in treatment of a patient directed by the treating physician or other qualified health care professional, initial assessment of the patient, including administration of validated rating scales, with the development of an individualized treatment plan, review by the psychiatric consultant with modifications of the plan if recommended, entering patient in a registry and tracking patient follow-up and progress using the registry, with appropriate documentation, and participation in weekly caseload consultation with the psychiatric consultant, and provision of brief interventions using evidence-based techniques such as behavioral activation, motivational interviewing, and other focused treatment strategies (list separately in addition to the advanced primary care management code)
Other Services	G0569	Subsequent psychiatric collaborative care management, in a subsequent month of behavioral health care manager activities, in consultation with a psychiatric consultant, and directed by the treating physician or other qualified health care professional, with the following required elements: tracking patient follow-up and progress using the registry, with appropriate documentation, participation in weekly caseload consultation with the psychiatric consultant, ongoing collaboration with and coordination of the patient's mental health care with the treating physician or other qualified health care professional and any other treating mental health providers, additional review of progress and recommendations for changes in treatment, as indicated, including medications, based on recommendations provided by the psychiatric consultant, provision of brief interventions using evidence-based techniques such as behavioral activation, motivational interviewing, and other focused treatment strategies, monitoring of patient outcomes using validated rating scales, and relapse prevention planning with patients as they achieve remission of symptoms and/or other treatment goals and are prepared for discharge from active treatment (list separately in addition to advanced primary care management code)
Other Services	G0570	Care management services for behavioral health conditions, directed by a physician or other qualified health care professional, per calendar month, with the following required elements: initial assessment or follow-up monitoring, including the use of applicable validated rating scales, behavioral health care planning in relation to behavioral/psychiatric health problems, including revision for patients who are not progressing or whose status changes, facilitating and coordinating treatment such as psychotherapy, pharmacotherapy, counseling and/or psychiatric consultation, and continuity of care with a designated member of the care team (list separately in addition to advanced primary care management code)
Other Services	G0571	Intraoperative nerve(s) cryoablation for post-surgical pain relief (list separately in addition to code for primary service)
Other Services	G0660	Team remote e/m new pt 10mins
Other Services	G0661	Team remote e/m new pt 20mins
Other Services	G0662	Team remote e/m new pt 30 mins
Other Services	G0663	Team remote e/m new pt 45mins
Other Services	G0664	Team remote e/m new pt 60mins
Other Services	G0665	Team remote e/m est. pt 10mins
Other Services	G0666	Team remote e/m est. pt 15mins
Other Services	G0667	Team remote e/m est. pt 25mins
Other Services	G0668	Team remote e/m est. pt 40mins
Other Services	G9871	Behavioral counseling for diabetes prevention, online, 60 minutes
Other Services	M1427	Documentation of medical reason(s) for performing a bone scan (including documented pain related to prostate cancer, salvage therapy, other medical reasons)

Added HCPCS Codes for 2026

Speciality	HCPCS Code	Description
Other Services	M1428	Patients who have bilateral absence of eyes any time during the patient's history through the end of the measurement period
Other Services	M1429	Retinal exam finding with evidence of retinopathy in left, right or both eyes with severity level documented
Other Services	M1430	Retinal exam finding without evidence of retinopathy in both eyes with severity level documented (in measurement year or in the prior year)
Other Services	M1433	Patient on oral chemotherapy on or within 30 days before denominator eligible encounter
Other Services	M1434	Patient on oral chemotherapy on or within 30 days after denominator eligible encounter
Other Services	M1435	Patient on oral chemotherapy during the performance period
Other Services	M1438	Time last known well to hospital arrival less than or equal to 3.5 hours (<= 210 minutes)
Other Services	M1439	Significant ocular conditions that impact the visual outcome of surgery
Other Services	M1441	Encounter corresponds to initial diagnosis of sleep apnea or first contact with sleep apnea diagnosed patient
Other Services	M1444	Delivery at < 39 weeks of gestation
Other Services	M1445	Postpartum care visit before or at 12 weeks of giving birth
Other Services	M1446	Patients who died any time prior to the end of the measure assessment period
Other Services	M1447	Patients with an active diagnosis of bipolar disorder any time prior to the end of the measure assessment period
Other Services	M1448	Patients with an active diagnosis of personality disorder any time prior to the end of the measure assessment period
Other Services	M1449	Patients with an active diagnosis of schizophrenia or psychotic disorder any time prior to the end of the measure assessment period
Other Services	M1450	Patients who received hospice or palliative care service any time during denominator identification period or the measure assessment period
Other Services	M1451	Patients with an active diagnosis of pervasive developmental disorder any time prior to the end of the measure assessment period
Other Services	M1452	Patient ever had a diagnosis of dementia
Other Services	M1453	Patients with a pre-operative visual acuity better than 20/40
Other Services	M1454	New cied
Other Services	M1455	Replaced or revised cied
Other Services	M1456	Patient had a heart transplant
Other Services	M1457	Patient had a diagnosis of asthma with any contact during the current or prior performance period or had asthma present on an active problem list any time during the performance period
Other Services	M1458	Patient died prior to the end of the performance period
Other Services	M1459	Patient was in hospice or receiving palliative care services at any time during the performance period
Other Services	M1460	Diagnosis for chronic obstructive pulmonary disease, emphysema, cystic fibrosis, or acute respiratory failure
Other Services	M1461	Patient diagnosis for chronic hepatitis c
Other Services	M1462	Patients with clinical indications for imaging of the head
Other Services	M1463	Documentation of at least two attempts to follow up with patient within 180 days of treatment
Other Services	M1464	No documentation of at least two attempts to follow up with patient within 180 days of treatment
Other Services	M1465	Patient follow up more than 180 days after treatment
Other Services	M1466	Patient had a lumbar fusion on the same date as the discectomy/laminectomy procedure
Other Services	M1467	Patients with an existing diagnosis of lynch syndrome
Other Services	M1468	Patient received recommended doses of hepatitis b vaccination based on age
Other Services	M1469	Patient has a history of hepatitis b illness or received a hepatitis b surface antigen, hepatitis b surface antibody, or total antibody to hepatitis b core antigen test with a positive result any time before or during the measurement period
Other Services	M1470	Documentation of medical reason(s) for not administering hepatitis b vaccine (e.g., prior anaphylaxis due to the hepatitis b vaccine)
Other Services	M1471	Documentation that patient is a medicare fee-for-service beneficiary and without additional supplementary insurance coverage for whom hep b vaccination is not reimbursable under current medicare part b coverage rules
Other Services	M1472	Patient did not receive recommended doses of hepatitis b vaccination based on age
Other Services	M1473	Patient situations, at any point during the denominator identification period, where the patient's functional capacity or motivation (or lack thereof) to improve may impact the accuracy of results of validated tools, such as delirium, dementia, intellectual disabilities, and pervasive and specific development disorders
Other Services	M1474	Patients with diagnosis of dementia
Other Services	M1475	Patients with diagnosis of huntington's disease
Other Services	M1476	Patients with diagnosis of cognitive impairment or alzheimer's disease

Added HCPCS Codes for 2026

Speciality	HCPCS Code	Description
Other Services	M1477	Diagnosis of delirium
Other Services	M1478	Psychoactive substance abuse
Other Services	M1479	Patients whose functional capacity or motivation (or lack thereof) to improve may impact the accuracy of results of validated tools such as delirium, dementia, intellectual disabilities, and pervasive and specific development disorders
Other Services	M1480	Patients whose functional capacity or motivation (or lack thereof) to improve may impact the accuracy of results of validated tools such as delirium, dementia, intellectual disabilities, and pervasive and specific development disorders
Other Services	M1481	Patients receiving hospice or palliative care or who died during the measurement period
Other Services	M1482	Positive/detectable hepatitis c virus quantitative or qualitative rna test result during the denominator identification period
Other Services	M1483	Patients who achieve sustained virological response as identified by an hcv rna test (cpt 87522) or (cpt 87521) with a negative/undetectable hcv rna result that occurred 20 weeks to 12 months after the first positive/detectable hcv rna test result within the denominator identification period
Other Services	M1484	Patients who did not have a repeat hcv rna labs performed for medical reasons documented by clinician (e.g., patient with limited life expectancy, delay in treatment of hcv related to treatment of hiv, hbv, hepatocellular carcinoma, decompensated cirrhosis)
Other Services	M1485	Patients who did not achieve sustained virological response as identified by an hcv rna test (cpt 87522) or (cpt 87521) with a negative/undetectable hcv rna result that occurred 20 weeks to 12 months after the first positive/detectable hcv rna test result within the denominator identification period
Other Services	M1486	Patients admitted to a skilled nursing facility (snf) during the period of evaluation
Other Services	M1487	Patients in hospice in the year before or during the period of evaluation
Other Services	M1488	Patients with a diagnosis for dementia in the year before or during the period of evaluation
Other Services	M1489	Patient status documented
Other Services	M1490	Patient status not documented
Other Services	M1491	Receiving esrd mcp dialysis services by the provider during the performance period
Other Services	M1492	Patients who did not report a fall
Other Services	M1493	Documentation of falls not performed due to medical reasons (e.g., syncope, vertigo and related disorders, restless leg syndrome, tourette syndrome/tic disorder, back pain, concussion/mild traumatic brain injury (mtbi), cervical dystonia, or epilepsy)
Other Services	M1494	Patients that reported a fall since the last visit
Other Services	M1495	Patients that reported a fall occurred who had a plan of care for falls documented or patients that did not report a fall
Other Services	M1496	Patients that had a fall who did not have a plan of care for falls documented or do not have documentation of being assessed for falls
Other Services	M1497	Documentation of falls not performed due to medical reasons (e.g., syncope, vertigo and related disorders, restless leg syndrome, tourette syndrome/tic disorder, back pain, concussion/mild traumatic brain injury (mtbi), cervical dystonia, or epilepsy)
Other Services	M1498	Diagnostic radiology mips value pathway
Other Services	M1499	Interventional radiology mips value pathway
Other Services	M1500	Neuropsychology mips value pathway
Other Services	M1501	Pathology mips value pathway
Other Services	M1502	Podiatry mips value pathway
Other Services	M1503	Vascular surgery mips value pathway

Drugs, Administered by Injection

Drugs, Administered by Injection	J0162	Injection, epinephrine (fresenius), not therapeutically equivalent to j0165, 0.1 mg
Drugs, Administered by Injection	J0654	Injection, liothyronine, 1 mcg
Drugs, Administered by Injection	J1736	Injection, meloxicam (delova), 1 mg
Drugs, Administered by Injection	J1737	Injection, meloxicam (azurity), 1 mg
Drugs, Administered by Injection	J1837	Injection, posaconazole, 1 mg
Drugs, Administered by Injection	J2516	Injection, pentamidine isethionate, 1 mg
Drugs, Administered by Injection	J2596	Injection, vasopressin (long grove), not therapeutically equivalent to j2598, 1 unit
Drugs, Administered by Injection	J2711	Injection, neostigmine methylsulfate 0.1 mg and glycopyrrolate 0.02 mg
Drugs, Administered by Injection	J3291	Injection, tranexamic acid in sodium chloride, 5 mg
Drugs, Administered by Injection	J3376	Injection, vancomycin hcl (hikma), not therapeutically equivalent to j3373, 10 mg
Drugs, Administered by Injection	J3379	Injection, valproate sodium, 5 mg

Added HCPCS Codes for 2026

Speciality	J3387	Injection, elivaldogene autotemcel, per treatment
Drugs, Administered by Injection	J9184	Injection, gemcitabine hydrochloride (avyxa), 200 mg
Drugs, Administered by Injection	J9256	Injection, nipocalimab-aahu, 3 mg
Drugs, Administered by Injection	J9326	Injection, telisotuzumab vedotin-tllv, 1 mg
Drugs, Administered by Injection	Q5160	Injection, bevacizumab-nwgd (jobevne), biosimilar, 10 mg

Telehealth services

Telehealth services	M1426	Encounters conducted via telehealth
Telehealth services	M1431	Encounters conducted via telehealth
Telehealth services	M1432	Encounters conducted via telehealth
Telehealth services	M1436	Encounters conducted via telehealth
Telehealth services	M1437	Encounters conducted via telehealth
Telehealth services	M1440	Encounters conducted via telehealth
Telehealth services	M1442	Encounters conducted via telehealth
Telehealth services	M1443	Encounters conducted via telehealth

Skin Substitutes and Biologicals

Skin Substitutes and Biologicals	Q4398	Summit ac, per square centimeter (add-on, list separately in addition to primary procedure)
Skin Substitutes and Biologicals	Q4399	Summit fx, per square centimeter (add-on, list separately in addition to primary procedure)
Skin Substitutes and Biologicals	Q4400	Polygon3 membrane, per square centimeter (add-on, list separately in addition to primary procedure)
Skin Substitutes and Biologicals	Q4401	Absolv3 membrane, per square centimeter (add-on, list separately in addition to primary procedure)
Skin Substitutes and Biologicals	Q4402	Xwrap 2.0, per square centimeter (add-on, list separately in addition to primary procedure)
Skin Substitutes and Biologicals	Q4403	Xwrap dual plus, per square centimeter (add-on, list separately in addition to primary procedure)
Skin Substitutes and Biologicals	Q4404	Xwrap hydro plus, per square centimeter (add-on, list separately in addition to primary procedure)
Skin Substitutes and Biologicals	Q4405	Xwrap fenestra plus, per square centimeter (add-on, list separately in addition to primary procedure)
Skin Substitutes and Biologicals	Q4406	Xwrap fenestra, per square centimeter (add-on, list separately in addition to primary procedure)
Skin Substitutes and Biologicals	Q4407	Xwrap tribus, per square centimeter (add-on, list separately in addition to primary procedure)
Skin Substitutes and Biologicals	Q4408	Xwrap hydro, per square centimeter (add-on, list separately in addition to primary procedure)
Skin Substitutes and Biologicals	Q4409	Amniomatrixf3x, per square centimeter (add-on, list separately in addition to primary procedure)
Skin Substitutes and Biologicals	Q4410	Amchomatrixdl, per square centimeter (add-on, list separately in addition to primary procedure)
Skin Substitutes and Biologicals	Q4411	Amniomatrixf4x, per square centimeter (add-on, list separately in addition to primary procedure)
Skin Substitutes and Biologicals	Q4412	Chorifix, per square centimeter (add-on, list separately in addition to primary procedure)
Skin Substitutes and Biologicals	Q4413	Cygnus solo, per square centimeter (add-on, list separately in addition to primary procedure)
Skin Substitutes and Biologicals	Q4414	Simplichor, per square centimeter (add-on, list separately in addition to primary procedure)
Skin Substitutes and Biologicals	Q4415	Alexiguard sl-t, per square centimeter (add-on, list separately in addition to primary procedure)
Skin Substitutes and Biologicals	Q4416	Alexiguard tl-t, per square centimeter (add-on, list separately in addition to primary procedure)
Skin Substitutes and Biologicals	Q4417	Alexiguard dl-t, per square centimeter (add-on, list separately in addition to primary procedure)
Skin Substitutes and Biologicals	Q4420	Nuform, per square centimeter (add-on, list separately in addition to primary procedure)
Skin Substitutes and Biologicals	Q4431	Pma skin substitute product, not otherwise specified (list in addition to primary procedure)
Skin Substitutes and Biologicals	Q4432	510(k) skin substitute product, not otherwise specified (list in addition to primary procedure)
Skin Substitutes and Biologicals	Q4433	361 hct/p skin substitute product, not otherwise specified (list in addition to primary procedure)

Revised HCPCS Codes for 2026

Specialty	HCPCS Code	2026 Description	2025 Description
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Matrix for Wound Management (Placental, Equine, Synthetic)

Matrix for Wound Management (Placental, Equine, Synthetic)	A2001	Innovamatrix ac, per square centimeter (add-on, list separately in addition to primary procedure)	Innovamatrix ac, per square centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2002	Mirrugen advanced wound matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Mirrugen advanced wound matrix, per square centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2005	Microlyte matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Microlyte matrix, per square centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2006	Novosorb synpath dermal matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Novosorb synpath dermal matrix, per square centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2007	Restrata, per square centimeter (add-on, list separately in addition to primary procedure)	Restrata, per square centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2008	Theragenesis, per square centimeter (add-on, list separately in addition to primary procedure)	Theragenesis, per square centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2009	Symphony, per square centimeter (add-on, list separately in addition to primary procedure)	Symphony, per square centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2010	Apis, per square centimeter (add-on, list separately in addition to primary procedure)	Apis, per square centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2011	Supra sdrm, per square centimeter (add-on, list separately in addition to primary procedure)	Supra sdrm, per square centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2012	Suprathel, per square centimeter (add-on, list separately in addition to primary procedure)	Suprathel, per square centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2013	Innovamatrix fs, per square centimeter (add-on, list separately in addition to primary procedure)	Innovamatrix fs, per square centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2015	Phoenix wound matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Phoenix wound matrix, per square centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2016	Permeaderm b, per square centimeter (add-on, list separately in addition to primary procedure)	Permeaderm b, per square centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2018	Permeaderm c, per square centimeter (add-on, list separately in addition to primary procedure)	Permeaderm c, per square centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2019	Kerecis omega3 marigen shield, per square centimeter (add-on, list separately in addition to primary procedure)	Kerecis omega3 marigen shield, per square centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2021	Neomatrix, per square centimeter (add-on, list separately in addition to primary procedure)	Neomatrix, per square centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2022	Innovaburn or innovamatrix xl, per square centimeter (add-on, list separately in addition to primary procedure)	Innovaburn or innovamatrix xl, per square centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2024	Resolve matrix or xenopatch, per square centimeter (add-on, list separately in addition to primary procedure)	Resolve matrix or xenopatch, per square centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2025	Miro3d, per cubic centimeter (add-on, list separately in addition to primary procedure)	Miro3d, per cubic centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2027	Matriderm, per square centimeter (add-on, list separately in addition to primary procedure)	Matriderm, per square centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2029	Mirotract wound matrix sheet, per cubic centimeter (add-on, list separately in addition to primary procedure)	Mirotract wound matrix sheet, per cubic centimeter

Revised HCPCS Codes for 2026

Speciality	HCPCS Code	2026 Description	2025 Description
Matrix for Wound Management (Placental, Equine, Synthetic)	A2031	Mirodry wound matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Mirodry wound matrix, per square centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2032	Myriad matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Myriad matrix, per square centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2034	Foundation drs solo, per square centimeter (add-on, list separately in addition to primary procedure)	Foundation drs solo, per square centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2036	Cohealyx collagen dermal matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Cohealyx collagen dermal matrix, per square centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2038	Marigen pacto, per square centimeter (add-on, list separately in addition to primary procedure)	Marigen pacto, per square centimeter
Matrix for Wound Management (Placental, Equine, Synthetic)	A2039	Innovamatrix fd, per square centimeter (add-on, list separately in addition to primary procedure)	Innovamatrix fd, per square centimeter

Skin Substitute Device

Skin Substitute Device	A4100	Non-sheet form skin substitute, fda cleared as a device, not otherwise specified (list in addition to primary procedure)	Skin substitute, fda cleared as a device, not otherwise specified
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Incontinence Devices and Supplies

Incontinence Devices and Supplies	A4351	Intermittent urinary catheter; straight tip, with or without coating (teflon, silicone, or silicone elastomer, etc.), each	Intermittent urinary catheter; straight tip, with or without coating (Teflon, silicone, silicone elastomer, or hydrophilic, etc.), each
Incontinence Devices and Supplies	A4352	Intermittent urinary catheter; coude (curved) tip, with or without coating (teflon, silicone, or silicone elastomeric, etc.), each	Intermittent urinary catheter; Coude (curved) tip, with or without coating (Teflon, silicone, silicone elastomeric, or hydrophilic, etc.), each

Imaging Supplies

Imaging Supplies	C1741	Anchor/screw for bone fixation, absorbable, metallic (implantable)	Anchor/screw for bone fixation, absorbable (implantable)
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Miscellaneous Diagnostic and Therapeutic Services

Miscellaneous Diagnostic and Therapeutic Services	G0136	Administration of a standardized, evidence-based assessment of physical activity and nutrition, 5-15 minutes, not more often than every 6 months	Administration of a standardized, evidence-based social determinants of health risk assessment tool, 5-15 minutes
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Opioid Use Disorder - Evaluation and Treatment

Opioid Use Disorder - Evaluation and Treatment	G2076	Intake activities, including initial medical examination that is conducted by an appropriately licensed practitioner and preparation of a care plan, which may be informed by administration of a standardized, evidence-based assessment, and that includes the patient's goals and mutually agreed-upon actions for the patient to meet those goals, including harm reduction interventions; the patient's needs and goals in the areas of education, vocational training, and employment; and the medical and psychiatric, psychosocial, economic, legal, housing, physical activity and/or nutrition needs and other recovery support services that a patient needs and wishes to pursue, conducted by an appropriately licensed/credentialed personnel (provision of the services by a medicare-enrolled opioid treatment program); list separately in addition to each primary code	Intake activities, including initial medical examination that is conducted by an appropriately licensed practitioner and preparation of a care plan, which may be informed by administration of a standardized, evidence-based social determinants of health risk assessment to identify unmet health-related social needs, and that includes the patient's goals and mutually agreed-upon actions for the patient to meet those goals, including harm reduction interventions; the patient's needs and goals in the areas of education, vocational training, and employment; and the medical and psychiatric, psychosocial, economic, legal, housing, and other recovery support services that a patient needs and wishes to pursue, conducted by an appropriately licensed/credentialed personnel (provision of the services by a medicare-enrolled opioid treatment program); list separately in addition to each primary code
Opioid Use Disorder - Evaluation and Treatment	G2077	Periodic assessment; assessing periodically by an otp practitioner and includes a review of moud dosing, treatment response, other substance use disorder treatment needs, responses and patient-identified goals, and other relevant physical, nutrition and psychiatric treatment needs and goals; may be informed by administration of a standardized, evidence-based assessment, or the need and interest for harm reduction interventions and recovery support services (provision of the services by a medicare-enrolled opioid treatment program); list separately in addition to each primary code	Periodic assessment; assessing periodically by an otp practitioner and includes a review of moud dosing, treatment response, other substance use disorder treatment needs, responses and patient-identified goals, and other relevant physical and psychiatric treatment needs and goals; assessment may be informed by administration of a standardized, evidence-based social determinants of health risk assessment to identify unmet health-related social needs, or the need and interest for harm reduction interventions and recovery support services (provision of the services by a medicare-enrolled opioid treatment program); list separately in addition to each primary code

Revised HCPCS Codes for 2026

Specialty	HCPCS Code	2026 Description	2025 Description
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Additional Quality Measures

Additional Quality Measures	G8430	Documentation of a medical reason(s) for not documenting, updating, or reviewing the patient's current medications list (e.g., patient is in an acute health crisis where time is of the essence and delay of treatment would jeopardize the patient's health status)	Documentation of a medical reason(s) for not documenting, updating, or reviewing the patient's current medications list (e.g., patient is in an urgent or emergent medical situation)
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Additional Assorted Quality Measures

Additional Assorted Quality Measures	G9414	Patient had one dose of meningococcal vaccine (serogroups a, c, w, y or a, c, w, y, b) on or between the patient's 10th and 13th birthdays	Patient had one dose of meningococcal vaccine (serogroups a, c, w, y) on or between the patient's 11th and 13th birthdays
Additional Assorted Quality Measures	G9415	Patient did not have one dose of meningococcal vaccine (serogroups a, c, w, y or a, c, w, y, b), on or between the patient's 10th and 13th birthdays	Patient did not have one dose of meningococcal vaccine (serogroups a, c, w, y) on or between the patient's 11th and 13th birthdays
Additional Assorted Quality Measures	G9788	Most recent bp is less than or equal to 130/80 mm hg	Most recent bp is less than or equal to 140/90 mm hg
Additional Assorted Quality Measures	G9790	Most recent bp is greater than 130/80 mm hg, or blood pressure not documented	Most recent bp is greater than 140/90 mm hg, or blood pressure not documented
Additional Assorted Quality Measures	G9796	Patient is currently on a high intensity statin therapy	Patient is currently on a statin therapy
Additional Assorted Quality Measures	G9797	Patient is not on a high intensity statin therapy	Patient is not on a statin therapy
Additional Assorted Quality Measures	G9832	AJCC stage at breast cancer diagnosis = i (Ia or Ib) and t-stage at breast cancer diagnosis = t1c	AJCC Stage at breast cancer diagnosis = I (Ia Or Ib) And t-Stage At breast cancer diagnosis does not equal = T1, T1A, T1B

Miscellaneous Drugs

Miscellaneous Drugs	J7322	Hyaluronan or derivative, hymovis or hymovis one, for intra-articular injection, 1 mg	Hyaluronan or derivative, hymovis, for intra-articular injection, 1 mg
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Other Services

Other Services	M1174	Patient received at least two doses of the herpes zoster recombinant vaccine (at least 28 days apart) on October 20, 2017, through the end of the measurement period	Patient received at least two doses of the herpes zoster recombinant vaccine (at least 28 days apart) anytime on or after the patient's 50th birthday before or during the measurement period
Other Services	M1176	Patient did not receive two doses of the herpes zoster recombinant vaccine (at least 28 days apart) on October 20, 2017, through the end of the measurement period	Patient did not receive two doses of the herpes zoster recombinant vaccine (at least 28 days apart) anytime on or after the patient's 50th birthday before or during the measurement period

Skin Substitutes and Biologicals

Skin Substitutes and Biologicals	Q4101	Apligraf, per square centimeter (add-on, list separately in addition to primary procedure)	Apligraf, per square centimeter
Skin Substitutes and Biologicals	Q4102	Oasis wound matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Oasis wound matrix, per square centimeter
Skin Substitutes and Biologicals	Q4103	Oasis burn matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Oasis burn matrix, per square centimeter
Skin Substitutes and Biologicals	Q4104	Integra bilayer matrix wound dressing (bmwd), per square centimeter (add-on, list separately in addition to primary procedure)	Integra bilayer matrix wound dressing (bmwd), per square centimeter
Skin Substitutes and Biologicals	Q4105	Integra dermal regeneration template (drt) or integra omnigraft dermal regeneration matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Integra dermal regeneration template (drt) or integra omnigraft dermal regeneration matrix, per square centimeter
Skin Substitutes and Biologicals	Q4107	Graftjacket, per square centimeter (add-on, list separately in addition to primary procedure)	Graftjacket, per square centimeter
Skin Substitutes and Biologicals	Q4108	Integra matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Integra matrix, per square centimeter
Skin Substitutes and Biologicals	Q4110	Primatrix, per square centimeter (add-on, list separately in addition to primary procedure)	Primatrix, per square centimeter
Skin Substitutes and Biologicals	Q4111	Gammagraft, per square centimeter (add-on, list separately in addition to primary procedure)	Gammagraft, per square centimeter
Skin Substitutes and Biologicals	Q4115	Alloskin, per square centimeter (add-on, list separately in addition to primary procedure)	Alloskin, per square centimeter

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Speciality	HCPCS Code	2026 Description	2025 Description
Skin Substitutes and Biologicals	Q4116	Alloderm, per square centimeter (add-on, list separately in addition to primary procedure)	Alloderm, per square centimeter
Skin Substitutes and Biologicals	Q4117	Hyalomatrix, per square centimeter (add-on, list separately in addition to primary procedure)	Hyalomatrix, per square centimeter
Skin Substitutes and Biologicals	Q4121	Theraskin, per square centimeter (add-on, list separately in addition to primary procedure)	Theraskin, per square centimeter
Skin Substitutes and Biologicals	Q4122	Dermacell, dermacell awm or dermacell awm porous, per square centimeter (add-on, list separately in addition to primary procedure)	Dermacell, dermacell awm or dermacell awm porous, per square centimeter
Skin Substitutes and Biologicals	Q4123	Alloskin rt, per square centimeter (add-on, list separately in addition to primary procedure)	Alloskin rt, per square centimeter
Skin Substitutes and Biologicals	Q4124	Oasis ultra tri-layer wound matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Oasis ultra tri-layer wound matrix, per square centimeter
Skin Substitutes and Biologicals	Q4125	Arthroflex, per square centimeter (add-on, list separately in addition to primary procedure)	Arthroflex, per square centimeter
Skin Substitutes and Biologicals	Q4126	Memoderm, dermaspan, tranzgraft or integuply, per square centimeter (add-on, list separately in addition to primary procedure)	Memoderm, dermaspan, tranzgraft or integuply, per square centimeter
Skin Substitutes and Biologicals	Q4127	Talymed, per square centimeter (add-on, list separately in addition to primary procedure)	Talymed, per square centimeter
Skin Substitutes and Biologicals	Q4128	Flex hd, or allopatch hd, per square centimeter (add-on, list separately in addition to primary procedure)	Flex hd, or allopatch hd, per square centimeter
Skin Substitutes and Biologicals	Q4130	Strattice tm, per square centimeter (add-on, list separately in addition to primary procedure)	Strattice tm, per square centimeter
Skin Substitutes and Biologicals	Q4132	Grafix core and grafixpl core, per square centimeter (add-on, list separately in addition to primary procedure)	Grafix core and grafixpl core, per square centimeter
Skin Substitutes and Biologicals	Q4133	Grafix prime, grafixpl prime, stravix and stravixpl, per square centimeter (add-on, list separately in addition to primary procedure)	Grafix prime, grafixpl prime, stravix and stravixpl, per square centimeter
Skin Substitutes and Biologicals	Q4134	Hmatrix, per square centimeter (add-on, list separately in addition to primary procedure)	Hmatrix, per square centimeter
Skin Substitutes and Biologicals	Q4135	Mediskin, per square centimeter (add-on, list separately in addition to primary procedure)	Mediskin, per square centimeter
Skin Substitutes and Biologicals	Q4136	Ez-derm, per square centimeter (add-on, list separately in addition to primary procedure)	Ez-derm, per square centimeter
Skin Substitutes and Biologicals	Q4137	Amnioexcel, amnioexcel plus or biodexcel, per square centimeter (add-on, list separately in addition to primary procedure)	Amnioexcel, amnioexcel plus or biodexcel, per square centimeter
Skin Substitutes and Biologicals	Q4138	Biodfence dryflex, per square centimeter (add-on, list separately in addition to primary procedure)	Biodfence dryflex, per square centimeter
Skin Substitutes and Biologicals	Q4140	Biodfence, per square centimeter (add-on, list separately in addition to primary procedure)	Biodfence, per square centimeter
Skin Substitutes and Biologicals	Q4141	Alloskin ac, per square centimeter (add-on, list separately in addition to primary procedure)	Alloskin ac, per square centimeter
Skin Substitutes and Biologicals	Q4142	Xcm biologic tissue matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Xcm biologic tissue matrix, per square centimeter
Skin Substitutes and Biologicals	Q4143	Repriza, per square centimeter (add-on, list separately in addition to primary procedure)	Repriza, per square centimeter
Skin Substitutes and Biologicals	Q4146	Tensix, per square centimeter (add-on, list separately in addition to primary procedure)	Tensix, per square centimeter
Skin Substitutes and Biologicals	Q4147	Architect, architect px, or architect fx, extracellular matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Architect, architect px, or architect fx, extracellular matrix, per square centimeter
Skin Substitutes and Biologicals	Q4148	Neox cord 1k, neox cord rt, or clarix cord 1k, per square centimeter (add-on, list separately in addition to primary procedure)	Neox cord 1k, neox cord rt, or clarix cord 1k, per square centimeter
Skin Substitutes and Biologicals	Q4150	Allowrap ds or dry, per square centimeter (add-on, list separately in addition to primary procedure)	Allowrap ds or dry, per square centimeter
Skin Substitutes and Biologicals	Q4151	Amnioband or guardian, per square centimeter (add-on, list separately in addition to primary procedure)	Amnioband or guardian, per square centimeter
Skin Substitutes and Biologicals	Q4152	Dermapure, per square centimeter (add-on, list separately in addition to primary procedure)	Dermapure, per square centimeter

Revised HCPCS Codes for 2026

Speciality	HCPCS Code	2026 Description	2025 Description
Skin Substitutes and Biologicals	Q4153	Dermavest and plurivest, per square centimeter (add-on, list separately in addition to primary procedure)	Dermavest and plurivest, per square centimeter
Skin Substitutes and Biologicals	Q4154	Biovance, per square centimeter (add-on, list separately in addition to primary procedure)	Biovance, per square centimeter
Skin Substitutes and Biologicals	Q4156	Neox 100 or clarix 100, per square centimeter (add-on, list separately in addition to primary procedure)	Neox 100 or clarix 100, per square centimeter
Skin Substitutes and Biologicals	Q4157	Revitalon, per square centimeter (add-on, list separately in addition to primary procedure)	Revitalon, per square centimeter
Skin Substitutes and Biologicals	Q4158	Kerecis omega3, per square centimeter (add-on, list separately in addition to primary procedure)	Kerecis omega3, per square centimeter
Skin Substitutes and Biologicals	Q4159	Affinity, per square centimeter (add-on, list separately in addition to primary procedure)	Affinity, per square centimeter
Skin Substitutes and Biologicals	Q4160	Nushield, per square centimeter (add-on, list separately in addition to primary procedure)	Nushield, per square centimeter
Skin Substitutes and Biologicals	Q4161	Bio-connekt wound matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Bio-connekt wound matrix, per square centimeter
Skin Substitutes and Biologicals	Q4163	Woundex, bioskin, per square centimeter (add-on, list separately in addition to primary procedure)	Woundex, bioskin, per square centimeter
Skin Substitutes and Biologicals	Q4164	Helicoll, per square centimeter (add-on, list separately in addition to primary procedure)	Helicoll, per square centimeter
Skin Substitutes and Biologicals	Q4165	Keramatrix or kerasorb, per square centimeter (add-on, list separately in addition to primary procedure)	Keramatrix or kerasorb, per square centimeter
Skin Substitutes and Biologicals	Q4166	Cytal, per square centimeter (add-on, list separately in addition to primary procedure)	Cytal, per square centimeter
Skin Substitutes and Biologicals	Q4167	Truskin, per square centimeter (add-on, list separately in addition to primary procedure)	Truskin, per square centimeter
Skin Substitutes and Biologicals	Q4169	Artacent wound, per square centimeter (add-on, list separately in addition to primary procedure)	Artacent wound, per square centimeter
Skin Substitutes and Biologicals	Q4170	Cygnus, per square centimeter (add-on, list separately in addition to primary procedure)	Cygnus, per square centimeter
Skin Substitutes and Biologicals	Q4173	Palingen or palingen xplus, per square centimeter (add-on, list separately in addition to primary procedure)	Palingen or palingen xplus, per square centimeter
Skin Substitutes and Biologicals	Q4175	Miroderm, per square centimeter (add-on, list separately in addition to primary procedure)	Miroderm, per square centimeter
Skin Substitutes and Biologicals	Q4176	Neopatch or therion, per square centimeter (add-on, list separately in addition to primary procedure)	Neopatch or therion, per square centimeter
Skin Substitutes and Biologicals	Q4178	Floweramniopatch, per square centimeter (add-on, list separately in addition to primary procedure)	Floweramniopatch, per square centimeter
Skin Substitutes and Biologicals	Q4179	Flowerderm, per square centimeter (add-on, list separately in addition to primary procedure)	Flowerderm, per square centimeter
Skin Substitutes and Biologicals	Q4180	Revita, per square centimeter (add-on, list separately in addition to primary procedure)	Revita, per square centimeter
Skin Substitutes and Biologicals	Q4181	Amnio wound, per square centimeter (add-on, list separately in addition to primary procedure)	Amnio wound, per square centimeter
Skin Substitutes and Biologicals	Q4182	Transcyte, per square centimeter (add-on, list separately in addition to primary procedure)	Transcyte, per square centimeter
Skin Substitutes and Biologicals	Q4183	Surgigraft, per square centimeter (add-on, list separately in addition to primary procedure)	Surgigraft, per square centimeter
Skin Substitutes and Biologicals	Q4184	Cellesta or cellesta duo, per square centimeter (add-on, list separately in addition to primary procedure)	Cellesta or cellesta duo, per square centimeter
Skin Substitutes and Biologicals	Q4186	Epifix, per square centimeter (add-on, list separately in addition to primary procedure)	Epifix, per square centimeter
Skin Substitutes and Biologicals	Q4187	Epicord, per square centimeter (add-on, list separately in addition to primary procedure)	Epicord, per square centimeter
Skin Substitutes and Biologicals	Q4188	Amnioarmor, per square centimeter (add-on, list separately in addition to primary procedure)	Amnioarmor, per square centimeter
Skin Substitutes and Biologicals	Q4190	Artacent ac, per square centimeter (add-on, list separately in addition to primary procedure)	Artacent ac, per square centimeter
Skin Substitutes and Biologicals	Q4191	Restorigin, per square centimeter (add-on, list separately in addition to primary procedure)	Restorigin, per square centimeter

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Speciality	HCPCS Code	2026 Description	2025 Description
Skin Substitutes and Biologicals	Q4193	Coll-e-derm, per square centimeter (add-on, list separately in addition to primary procedure)	Coll-e-derm, per square centimeter
Skin Substitutes and Biologicals	Q4194	Novachor, per square centimeter (add-on, list separately in addition to primary procedure)	Novachor, per square centimeter
Skin Substitutes and Biologicals	Q4195	Puraply, per square centimeter (add-on, list separately in addition to primary procedure)	Puraply, per square centimeter
Skin Substitutes and Biologicals	Q4196	Puraply am, per square centimeter (add-on, list separately in addition to primary procedure)	Puraply am, per square centimeter
Skin Substitutes and Biologicals	Q4197	Puraply xt, per square centimeter (add-on, list separately in addition to primary procedure)	Puraply xt, per square centimeter
Skin Substitutes and Biologicals	Q4198	Genesis amniotic membrane, per square centimeter (add-on, list separately in addition to primary procedure)	Genesis amniotic membrane, per square centimeter
Skin Substitutes and Biologicals	Q4199	Cygnus matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Cygnus matrix, per square centimeter
Skin Substitutes and Biologicals	Q4200	Skin te, per square centimeter (add-on, list separately in addition to primary procedure)	Skin te, per square centimeter
Skin Substitutes and Biologicals	Q4201	Matrion, per square centimeter (add-on, list separately in addition to primary procedure)	Matrion, per square centimeter
Skin Substitutes and Biologicals	Q4203	Derma-gide, per square centimeter (add-on, list separately in addition to primary procedure)	Derma-gide, per square centimeter
Skin Substitutes and Biologicals	Q4204	Xwrap, per square centimeter (add-on, list separately in addition to primary procedure)	Xwrap, per square centimeter
Skin Substitutes and Biologicals	Q4205	Membrane graft or membrane wrap, per square centimeter (add-on, list separately in addition to primary procedure)	Membrane graft or membrane wrap, per square centimeter
Skin Substitutes and Biologicals	Q4208	Novafix, per square centimeter (add-on, list separately in addition to primary procedure)	Novafix, per square centimeter
Skin Substitutes and Biologicals	Q4209	Surgraft, per square centimeter (add-on, list separately in addition to primary procedure)	Surgraft, per square centimeter
Skin Substitutes and Biologicals	Q4211	Amnion bio or axobiomembrane, per square centimeter (add-on, list separately in addition to primary procedure)	Amnion bio or axobiomembrane, per square centimeter
Skin Substitutes and Biologicals	Q4214	Cellesta cord, per square centimeter (add-on, list separately in addition to primary procedure)	Cellesta cord, per square centimeter
Skin Substitutes and Biologicals	Q4216	Artacent cord, per square centimeter (add-on, list separately in addition to primary procedure)	Artacent cord, per square centimeter
Skin Substitutes and Biologicals	Q4217	Woundfix, biowound, woundfix plus, biowound plus, woundfix xplus or biowound xplus, per square centimeter (add-on, list separately in addition to primary procedure)	Woundfix, biowound, woundfix plus, biowound plus, woundfix xplus or biowound xplus, per square centimeter
Skin Substitutes and Biologicals	Q4218	Surgicord, per square centimeter (add-on, list separately in addition to primary procedure)	Surgicord, per square centimeter
Skin Substitutes and Biologicals	Q4219	Surgigraft-dual, per square centimeter (add-on, list separately in addition to primary procedure)	Surgigraft-dual, per square centimeter
Skin Substitutes and Biologicals	Q4220	Bellacell hd or surederm, per square centimeter (add-on, list separately in addition to primary procedure)	Bellacell hd or surederm, per square centimeter
Skin Substitutes and Biologicals	Q4221	Amniowrap2, per square centimeter (add-on, list separately in addition to primary procedure)	Amniowrap2, per square centimeter
Skin Substitutes and Biologicals	Q4222	Progenamatrix, per square centimeter (add-on, list separately in addition to primary procedure)	Progenamatrix, per square centimeter
Skin Substitutes and Biologicals	Q4224	Human health factor 10 amniotic patch (hhf10-p), per square centimeter (add-on, list separately in addition to primary procedure)	Human health factor 10 amniotic patch (hhf10-p), per square centimeter
Skin Substitutes and Biologicals	Q4225	Amniobind or dermabind tl, per square centimeter (add-on, list separately in addition to primary procedure)	Amniobind or dermabind tl, per square centimeter
Skin Substitutes and Biologicals	Q4227	Amniocore, per square centimeter (add-on, list separately in addition to primary procedure)	Amniocore, per square centimeter
Skin Substitutes and Biologicals	Q4229	Cogenex amniotic membrane, per square centimeter (add-on, list separately in addition to primary procedure)	Cogenex amniotic membrane, per square centimeter
Skin Substitutes and Biologicals	Q4232	Corplex, per square centimeter (add-on, list separately in addition to primary procedure)	Corplex, per square centimeter
Skin Substitutes and Biologicals	Q4234	Xcellerate, per square centimeter (add-on, list separately in addition to primary procedure)	Xcellerate, per square centimeter
Skin Substitutes and Biologicals	Q4235	Amniorepair or altiply, per square centimeter (add-on, list separately in addition to primary procedure)	Amniorepair or altiply, per square centimeter

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Skin Substitutes and Biologicals	Q4236	Carepatch, per square centimeter (add-on, list separately in addition to primary procedure)	Carepatch, per square centimeter
Skin Substitutes and Biologicals	Q4237	Cryo-cord, per square centimeter (add-on, list separately in addition to primary procedure)	Cryo-cord, per square centimeter
Skin Substitutes and Biologicals	Q4238	Derm-maxx, per square centimeter (add-on, list separately in addition to primary procedure)	Derm-maxx, per square centimeter
Skin Substitutes and Biologicals	Q4239	Amnio-maxx or amnio-maxx lite, per square centimeter (add-on, list separately in addition to primary procedure)	Amnio-maxx or amnio-maxx lite, per square centimeter
Skin Substitutes and Biologicals	Q4247	Amniotext patch, per square centimeter (add-on, list separately in addition to primary procedure)	Amniotext patch, per square centimeter
Skin Substitutes and Biologicals	Q4248	Dermacyte amniotic membrane allograft, per square centimeter (add-on, list separately in addition to primary procedure)	Dermacyte amniotic membrane allograft, per square centimeter
Skin Substitutes and Biologicals	Q4249	Amniplly, for topical use only, per square centimeter (add-on, list separately in addition to primary procedure)	Amniplly, for topical use only, per square centimeter
Skin Substitutes and Biologicals	Q4250	Amnioamp-mp, per square centimeter (add-on, list separately in addition to primary procedure)	Amnioamp-mp, per square centimeter
Skin Substitutes and Biologicals	Q4251	Vim, per square centimeter (add-on, list separately in addition to primary procedure)	Vim, per square centimeter
Skin Substitutes and Biologicals	Q4252	Vendaje, per square centimeter (add-on, list separately in addition to primary procedure)	Vendaje, per square centimeter
Skin Substitutes and Biologicals	Q4253	Zenith amniotic membrane, per square centimeter (add-on, list separately in addition to primary procedure)	Zenith amniotic membrane, per square centimeter
Skin Substitutes and Biologicals	Q4254	Novafix dl, per square centimeter (add-on, list separately in addition to primary procedure)	Novafix dl, per square centimeter
Skin Substitutes and Biologicals	Q4255	Reguard, for topical use only, per square centimeter (add-on, list separately in addition to primary procedure)	Reguard, for topical use only, per square centimeter
Skin Substitutes and Biologicals	Q4256	Mlg-complete, per square centimeter (add-on, list separately in addition to primary procedure)	Mlg-complete, per square centimeter
Skin Substitutes and Biologicals	Q4257	Relese, per square centimeter (add-on, list separately in addition to primary procedure)	Relese, per square centimeter
Skin Substitutes and Biologicals	Q4258	Enverse, per square centimeter (add-on, list separately in addition to primary procedure)	Enverse, per square centimeter
Skin Substitutes and Biologicals	Q4259	Celera dual layer or celera dual membrane, per square centimeter (add-on, list separately in addition to primary procedure)	Celera dual layer or celera dual membrane, per square centimeter
Skin Substitutes and Biologicals	Q4260	Signature apatch, per square centimeter (add-on, list separately in addition to primary procedure)	Signature apatch, per square centimeter
Skin Substitutes and Biologicals	Q4261	Tag, per square centimeter (add-on, list separately in addition to primary procedure)	Tag, per square centimeter
Skin Substitutes and Biologicals	Q4262	Dual layer impax membrane, per square centimeter (add-on, list separately in addition to primary procedure)	Dual layer impax membrane, per square centimeter
Skin Substitutes and Biologicals	Q4263	Surgraft tl, per square centimeter (add-on, list separately in addition to primary procedure)	Surgraft tl, per square centimeter
Skin Substitutes and Biologicals	Q4264	Cocoon membrane, per square centimeter (add-on, list separately in addition to primary procedure)	Cocoon membrane, per square centimeter
Skin Substitutes and Biologicals	Q4265	Neostim tl, per square centimeter (add-on, list separately in addition to primary procedure)	Neostim tl, per square centimeter
Skin Substitutes and Biologicals	Q4266	Neostim membrane, per square centimeter (add-on, list separately in addition to primary procedure)	Neostim membrane, per square centimeter
Skin Substitutes and Biologicals	Q4267	Neostim dl, per square centimeter (add-on, list separately in addition to primary procedure)	Neostim dl, per square centimeter
Skin Substitutes and Biologicals	Q4268	Surgraft ft, per square centimeter (add-on, list separately in addition to primary procedure)	Surgraft ft, per square centimeter
Skin Substitutes and Biologicals	Q4269	Surgraft xt, per square centimeter (add-on, list separately in addition to primary procedure)	Surgraft xt, per square centimeter
Skin Substitutes and Biologicals	Q4270	Complete sl, per square centimeter (add-on, list separately in addition to primary procedure)	Complete sl, per square centimeter
Skin Substitutes and Biologicals	Q4271	Complete ft, per square centimeter (add-on, list separately in addition to primary procedure)	Complete ft, per square centimeter
Skin Substitutes and Biologicals	Q4272	Esano a, per square centimeter (add-on, list separately in addition to primary procedure)	Esano a, per square centimeter

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Speciality	HCPCS Code	2026 Description	2025 Description
Skin Substitutes and Biologicals	Q4273	Esano aaa, per square centimeter (add-on, list separately in addition to primary procedure)	Esano aaa, per square centimeter
Skin Substitutes and Biologicals	Q4274	Esano ac, per square centimeter (add-on, list separately in addition to primary procedure)	Esano ac, per square centimeter
Skin Substitutes and Biologicals	Q4275	Esano aca, per square centimeter (add-on, list separately in addition to primary procedure)	Esano aca, per square centimeter
Skin Substitutes and Biologicals	Q4276	Orion, per square centimeter (add-on, list separately in addition to primary procedure)	Orion, per square centimeter
Skin Substitutes and Biologicals	Q4278	Epieffect, per square centimeter (add-on, list separately in addition to primary procedure)	Epieffect, per square centimeter
Skin Substitutes and Biologicals	Q4279	Vendaje ac, per square centimeter (add-on, list separately in addition to primary procedure)	Vendaje ac, per square centimeter
Skin Substitutes and Biologicals	Q4280	Xcell amnio matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Xcell amnio matrix, per square centimeter
Skin Substitutes and Biologicals	Q4281	Barrera sl or barrera dl, per square centimeter (add-on, list separately in addition to primary procedure)	Barrera sl or barrera dl, per square centimeter
Skin Substitutes and Biologicals	Q4282	Cygnus dual, per square centimeter (add-on, list separately in addition to primary procedure)	Cygnus dual, per square centimeter
Skin Substitutes and Biologicals	Q4283	Biovance tri-layer or biovance 3l, per square centimeter (add-on, list separately in addition to primary procedure)	Biovance tri-layer or biovance 3l, per square centimeter
Skin Substitutes and Biologicals	Q4284	Dermabind sl, per square centimeter (add-on, list separately in addition to primary procedure)	Dermabind sl, per square centimeter
Skin Substitutes and Biologicals	Q4285	Nudyn dl or nudyn dl mesh, per square centimeter (add-on, list separately in addition to primary procedure)	Nudyn dl or nudyn dl mesh, per square centimeter
Skin Substitutes and Biologicals	Q4286	Nudyn sl or nudyn slw, per square centimeter (add-on, list separately in addition to primary procedure)	Nudyn sl or nudyn slw, per square centimeter
Skin Substitutes and Biologicals	Q4287	Dermabind dl, per square centimeter (add-on, list separately in addition to primary procedure)	Dermabind dl, per square centimeter
Skin Substitutes and Biologicals	Q4288	Dermabind ch, per square centimeter (add-on, list separately in addition to primary procedure)	Dermabind ch, per square centimeter
Skin Substitutes and Biologicals	Q4289	Revoshield + amniotic barrier, per square centimeter (add-on, list separately in addition to primary procedure)	Revoshield + amniotic barrier, per square centimeter
Skin Substitutes and Biologicals	Q4290	Membrane wrap-hydro, per square centimeter (add-on, list separately in addition to primary procedure)	Membrane wrap-hydro, per square centimeter
Skin Substitutes and Biologicals	Q4291	Lamellas xt, per square centimeter (add-on, list separately in addition to primary procedure)	Lamellas xt, per square centimeter
Skin Substitutes and Biologicals	Q4292	Lamellas, per square centimeter (add-on, list separately in addition to primary procedure)	Lamellas, per square centimeter
Skin Substitutes and Biologicals	Q4293	Acesso dl, per square centimeter (add-on, list separately in addition to primary procedure)	Acesso dl, per square centimeter
Skin Substitutes and Biologicals	Q4294	Amnio quad-core, per square centimeter (add-on, list separately in addition to primary procedure)	Amnio quad-core, per square centimeter
Skin Substitutes and Biologicals	Q4295	Amnio tri-core amniotic, per square centimeter (add-on, list separately in addition to primary procedure)	Amnio tri-core amniotic, per square centimeter
Skin Substitutes and Biologicals	Q4296	Rebound matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Rebound matrix, per square centimeter
Skin Substitutes and Biologicals	Q4297	Emerge matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Emerge matrix, per square centimeter
Skin Substitutes and Biologicals	Q4298	Amniocore pro, per square centimeter (add-on, list separately in addition to primary procedure)	Amniocore pro, per square centimeter
Skin Substitutes and Biologicals	Q4299	Amniocore pro+, per square centimeter (add-on, list separately in addition to primary procedure)	Amniocore pro+, per square centimeter
Skin Substitutes and Biologicals	Q4300	Acesso tl, per square centimeter (add-on, list separately in addition to primary procedure)	Acesso tl, per square centimeter
Skin Substitutes and Biologicals	Q4301	Activate matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Activate matrix, per square centimeter
Skin Substitutes and Biologicals	Q4302	Complete aca, per square centimeter (add-on, list separately in addition to primary procedure)	Complete aca, per square centimeter
Skin Substitutes and Biologicals	Q4303	Complete aa, per square centimeter (add-on, list separately in addition to primary procedure)	Complete aa, per square centimeter

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Speciality	HCPCS Code	2026 Description	2025 Description
Skin Substitutes and Biologicals	Q4304	Grafix plus, per square centimeter (add-on, list separately in addition to primary procedure)	Grafix plus, per square centimeter
Skin Substitutes and Biologicals	Q4305	American amnion ac tri-layer, per square centimeter (add-on, list separately in addition to primary procedure)	American amnion ac tri-layer, per square centimeter
Skin Substitutes and Biologicals	Q4306	American amnion ac, per square centimeter (add-on, list separately in addition to primary procedure)	American amnion ac, per square centimeter
Skin Substitutes and Biologicals	Q4307	American amnion, per square centimeter (add-on, list separately in addition to primary procedure)	American amnion, per square centimeter
Skin Substitutes and Biologicals	Q4308	Sanopellis, per square centimeter (add-on, list separately in addition to primary procedure)	Sanopellis, per square centimeter
Skin Substitutes and Biologicals	Q4309	Via matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Via matrix, per square centimeter
Skin Substitutes and Biologicals	Q4311	Acesso, per square centimeter (add-on, list separately in addition to primary procedure)	Acesso, per square centimeter
Skin Substitutes and Biologicals	Q4312	Acesso ac, per square centimeter (add-on, list separately in addition to primary procedure)	Acesso ac, per square centimeter
Skin Substitutes and Biologicals	Q4313	Dermabind fm, per square centimeter (add-on, list separately in addition to primary procedure)	Dermabind fm, per square centimeter
Skin Substitutes and Biologicals	Q4314	Reeva ft, per square centimeter (add-on, list separately in addition to primary procedure)	Reeva ft, per square centimeter
Skin Substitutes and Biologicals	Q4315	Regenelink amniotic membrane allograft, per square centimeter (add-on, list separately in addition to primary procedure)	Regenelink amniotic membrane allograft, per square centimeter
Skin Substitutes and Biologicals	Q4316	Amchoplast, per square centimeter (add-on, list separately in addition to primary procedure)	Amchoplast, per square centimeter
Skin Substitutes and Biologicals	Q4317	Vitograft, per square centimeter (add-on, list separately in addition to primary procedure)	Vitograft, per square centimeter
Skin Substitutes and Biologicals	Q4318	E-graft, per square centimeter (add-on, list separately in addition to primary procedure)	E-graft, per square centimeter
Skin Substitutes and Biologicals	Q4319	Sanograft, per square centimeter (add-on, list separately in addition to primary procedure)	Sanograft, per square centimeter
Skin Substitutes and Biologicals	Q4320	Pellograft, per square centimeter (add-on, list separately in addition to primary procedure)	Pellograft, per square centimeter
Skin Substitutes and Biologicals	Q4321	Renograft, per square centimeter (add-on, list separately in addition to primary procedure)	Renograft, per square centimeter
Skin Substitutes and Biologicals	Q4322	Caregraft, per square centimeter (add-on, list separately in addition to primary procedure)	Caregraft, per square centimeter
Skin Substitutes and Biologicals	Q4323	Alloply, per square centimeter (add-on, list separately in addition to primary procedure)	Alloply, per square centimeter
Skin Substitutes and Biologicals	Q4324	Amniotx, per square centimeter (add-on, list separately in addition to primary procedure)	Amniotx, per square centimeter
Skin Substitutes and Biologicals	Q4325	Acapatch, per square centimeter (add-on, list separately in addition to primary procedure)	Acapatch, per square centimeter
Skin Substitutes and Biologicals	Q4326	Woundplus, per square centimeter (add-on, list separately in addition to primary procedure)	Woundplus, per square centimeter
Skin Substitutes and Biologicals	Q4327	Duoamnion, per square centimeter (add-on, list separately in addition to primary procedure)	Duoamnion, per square centimeter
Skin Substitutes and Biologicals	Q4328	Most, per square centimeter (add-on, list separately in addition to primary procedure)	Most, per square centimeter
Skin Substitutes and Biologicals	Q4329	Singlay, per square centimeter (add-on, list separately in addition to primary procedure)	Singlay, per square centimeter
Skin Substitutes and Biologicals	Q4330	Total, per square centimeter (add-on, list separately in addition to primary procedure)	Total, per square centimeter
Skin Substitutes and Biologicals	Q4331	Axolotl graft, per square centimeter (add-on, list separately in addition to primary procedure)	Axolotl graft, per square centimeter
Skin Substitutes and Biologicals	Q4332	Axolotl dualgraft, per square centimeter (add-on, list separately in addition to primary procedure)	Axolotl dualgraft, per square centimeter
Skin Substitutes and Biologicals	Q4333	Ardeograft, per square centimeter (add-on, list separately in addition to primary procedure)	Ardeograft, per square centimeter
Skin Substitutes and Biologicals	Q4334	Amnioplast 1, per square centimeter (add-on, list separately in addition to primary procedure)	Amnioplast 1, per square centimeter

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Speciality	HCPCS Code	2026 Description	2025 Description
Skin Substitutes and Biologicals	Q4335	Amnioplast 2, per square centimeter (add-on, list separately in addition to primary procedure)	Amnioplast 2, per square centimeter
Skin Substitutes and Biologicals	Q4336	Artacent c, per square centimeter (add-on, list separately in addition to primary procedure)	Artacent c, per square centimeter
Skin Substitutes and Biologicals	Q4337	Artacent trident, per square centimeter (add-on, list separately in addition to primary procedure)	Artacent trident, per square centimeter
Skin Substitutes and Biologicals	Q4338	Artacent velos, per square centimeter (add-on, list separately in addition to primary procedure)	Artacent velos, per square centimeter
Skin Substitutes and Biologicals	Q4339	Artacent vericlen, per square centimeter (add-on, list separately in addition to primary procedure)	Artacent vericlen, per square centimeter
Skin Substitutes and Biologicals	Q4340	Simpligraft, per square centimeter (add-on, list separately in addition to primary procedure)	Simpligraft, per square centimeter
Skin Substitutes and Biologicals	Q4341	Simplimax, per square centimeter (add-on, list separately in addition to primary procedure)	Simplimax, per square centimeter
Skin Substitutes and Biologicals	Q4342	Theramend, per square centimeter (add-on, list separately in addition to primary procedure)	Theramend, per square centimeter
Skin Substitutes and Biologicals	Q4343	Dermacyte ac matrix amniotic membrane allograft, per square centimeter (add-on, list separately in addition to primary procedure)	Dermacyte ac matrix amniotic membrane allograft, per square centimeter
Skin Substitutes and Biologicals	Q4344	Tri-membrane wrap, per square centimeter (add-on, list separately in addition to primary procedure)	Tri-membrane wrap, per square centimeter
Skin Substitutes and Biologicals	Q4345	Matrix hd allograft dermis, per square centimeter (add-on, list separately in addition to primary procedure)	Matrix hd allograft dermis, per square centimeter
Skin Substitutes and Biologicals	Q4346	Shelter dm matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Shelter dm matrix, per square centimeter
Skin Substitutes and Biologicals	Q4347	Rampart dl matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Rampart dl matrix, per square centimeter
Skin Substitutes and Biologicals	Q4348	Sentry sl matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Sentry sl matrix, per square centimeter
Skin Substitutes and Biologicals	Q4349	Mantle dl matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Mantle dl matrix, per square centimeter
Skin Substitutes and Biologicals	Q4350	Palisade dm matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Palisade dm matrix, per square centimeter
Skin Substitutes and Biologicals	Q4351	Enclose tl matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Enclose tl matrix, per square centimeter
Skin Substitutes and Biologicals	Q4352	Overlay sl matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Overlay sl matrix, per square centimeter
Skin Substitutes and Biologicals	Q4353	Xceed tl matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Xceed tl matrix, per square centimeter
Skin Substitutes and Biologicals	Q4354	Palingen dual-layer membrane and dual-layer palingen x-membrane, per square centimeter (add-on, list separately in addition to primary procedure)	Palingen dual-layer membrane and dual-layer palingen x-membrane, per square centimeter
Skin Substitutes and Biologicals	Q4355	Abioment xplus membrane and abioment xplus hydromembrane, per square centimeter (add-on, list separately in addition to primary procedure)	Abioment xplus membrane and abioment xplus hydromembrane, per square centimeter
Skin Substitutes and Biologicals	Q4356	Abioment membrane and abioment hydromembrane, per square centimeter (add-on, list separately in addition to primary procedure)	Abioment membrane and abioment hydromembrane, per square centimeter
Skin Substitutes and Biologicals	Q4357	Xwrap plus, per square centimeter (add-on, list separately in addition to primary procedure)	Xwrap plus, per square centimeter
Skin Substitutes and Biologicals	Q4358	Xwrap dual, per square centimeter (add-on, list separately in addition to primary procedure)	Xwrap dual, per square centimeter
Skin Substitutes and Biologicals	Q4359	Choriptyl, per square centimeter (add-on, list separately in addition to primary procedure)	Choriptyl, per square centimeter
Skin Substitutes and Biologicals	Q4360	Amchoplast fd, per square centimeter (add-on, list separately in addition to primary procedure)	Amchoplast fd, per square centimeter
Skin Substitutes and Biologicals	Q4361	Epixpress, per square centimeter (add-on, list separately in addition to primary procedure)	Epixpress, per square centimeter
Skin Substitutes and Biologicals	Q4362	Cygnus disk, per square centimeter (add-on, list separately in addition to primary procedure)	Cygnus disk, per square centimeter

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Speciality	HCPCS Code	2026 Description	2025 Description
Skin Substitutes and Biologicals	Q4363	Amnio burgeon membrane and hydromembrane, per square centimeter (add-on, list separately in addition to primary procedure)	Amnio burgeon membrane and hydromembrane, per square centimeter
Skin Substitutes and Biologicals	Q4364	Amnio burgeon xplus membrane and xplus hydromembrane, per square centimeter (add-on, list separately in addition to primary procedure)	Amnio burgeon xplus membrane and xplus hydromembrane, per square centimeter
Skin Substitutes and Biologicals	Q4365	Amnio burgeon dual-layer membrane, per square centimeter (add-on, list separately in addition to primary procedure)	Amnio burgeon dual-layer membrane, per square centimeter
Skin Substitutes and Biologicals	Q4366	Dual layer amnio burgeon x-membrane, per square centimeter (add-on, list separately in addition to primary procedure)	Dual layer amnio burgeon x-membrane, per square centimeter
Skin Substitutes and Biologicals	Q4367	Amniocore sl, per square centimeter (add-on, list separately in addition to primary procedure)	Amniocore sl, per square centimeter
Skin Substitutes and Biologicals	Q4368	Amchothick, per square centimeter (add-on, list separately in addition to primary procedure)	Amchothick, per square centimeter
Skin Substitutes and Biologicals	Q4369	Amnioplast 3, per square centimeter (add-on, list separately in addition to primary procedure)	Amnioplast 3, per square centimeter
Skin Substitutes and Biologicals	Q4370	Aeroguard, per square centimeter (add-on, list separately in addition to primary procedure)	Aeroguard, per square centimeter
Skin Substitutes and Biologicals	Q4371	Neoguard, per square centimeter (add-on, list separately in addition to primary procedure)	Neoguard, per square centimeter
Skin Substitutes and Biologicals	Q4372	Amchoplast excel, per square centimeter (add-on, list separately in addition to primary procedure)	Amchoplast excel, per square centimeter
Skin Substitutes and Biologicals	Q4373	Membrane wrap lite, per square centimeter (add-on, list separately in addition to primary procedure)	Membrane wrap lite, per square centimeter
Skin Substitutes and Biologicals	Q4375	Duograft ac, per square centimeter (add-on, list separately in addition to primary procedure)	Duograft ac, per square centimeter
Skin Substitutes and Biologicals	Q4376	Duograft aa, per square centimeter (add-on, list separately in addition to primary procedure)	Duograft aa, per square centimeter
Skin Substitutes and Biologicals	Q4377	Trigraft ft, per square centimeter (add-on, list separately in addition to primary procedure)	Trigraft ft, per square centimeter
Skin Substitutes and Biologicals	Q4378	Renew ft matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Renew ft matrix, per square centimeter
Skin Substitutes and Biologicals	Q4379	Amniodefend ft matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Amniodefend ft matrix, per square centimeter
Skin Substitutes and Biologicals	Q4380	Advograft one, per square centimeter (add-on, list separately in addition to primary procedure)	Advograft one, per square centimeter
Skin Substitutes and Biologicals	Q4382	Advograft dual, per square centimeter (add-on, list separately in addition to primary procedure)	Advograft dual, per square centimeter
Skin Substitutes and Biologicals	Q4383	Axolotl graft ultra, per square centimeter (add-on, list separately in addition to primary procedure)	Axolotl graft ultra, per square centimeter
Skin Substitutes and Biologicals	Q4384	Axolotl dualgraft ultra, per square centimeter (add-on, list separately in addition to primary procedure)	Axolotl dualgraft ultra, per square centimeter
Skin Substitutes and Biologicals	Q4385	Apollo ft, per square centimeter (add-on, list separately in addition to primary procedure)	Apollo ft, per square centimeter
Skin Substitutes and Biologicals	Q4386	Acesso trifaca, per square centimeter (add-on, list separately in addition to primary procedure)	Acesso trifaca, per square centimeter
Skin Substitutes and Biologicals	Q4387	Neothelium ft, per square centimeter (add-on, list separately in addition to primary procedure)	Neothelium ft, per square centimeter
Skin Substitutes and Biologicals	Q4388	Neothelium 4l, per square centimeter (add-on, list separately in addition to primary procedure)	Neothelium 4l, per square centimeter
Skin Substitutes and Biologicals	Q4389	Neothelium 4l+, per square centimeter (add-on, list separately in addition to primary procedure)	Neothelium 4l+, per square centimeter
Skin Substitutes and Biologicals	Q4390	Ascendion, per square centimeter (add-on, list separately in addition to primary procedure)	Ascendion, per square centimeter
Skin Substitutes and Biologicals	Q4391	Amnioplast double, per square centimeter (add-on, list separately in addition to primary procedure)	Amnioplast double, per square centimeter
Skin Substitutes and Biologicals	Q4392	Grafix duo, per square centimeter (add-on, list separately in addition to primary procedure)	Grafix duo, per square centimeter
Skin Substitutes and Biologicals	Q4393	Surgraft ac, per square centimeter (add-on, list separately in addition to primary procedure)	Surgraft ac, per square centimeter
Skin Substitutes and Biologicals	Q4394	Surgraft aca, per square centimeter (add-on, list separately in addition to primary procedure)	Surgraft aca, per square centimeter

Revised HCPCS Codes for 2026

Speciality	HCPCS Code	2026 Description	2025 Description
Skin Substitutes and Biologicals	Q4395	Acelagraft, per square centimeter (add-on, list separately in addition to primary procedure)	Acelagraft, per square centimeter
Skin Substitutes and Biologicals	Q4396	Natalin, per square centimeter (add-on, list separately in addition to primary procedure)	Natalin, per square centimeter
Skin Substitutes and Biologicals	Q4397	Summit aaa, per square centimeter (add-on, list separately in addition to primary procedure)	Summit aaa, per square centimeter

Deleted HCPCS Codes for 2026

Speciality	HCPCS Code	Description
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Skin Substitute Graft Application

Skin Substitute Graft Application	C5271	Application of low cost skin substitute graft to trunk, arms, legs, total wound surface area up to 100 sq cm; first 25 sq cm or less wound surface area
Skin Substitute Graft Application	C5272	Application of low cost skin substitute graft to trunk, arms, legs, total wound surface area up to 100 sq cm; each additional 25 sq cm wound surface area, or part thereof (list separately in addition to code for primary procedure)
Skin Substitute Graft Application	C5273	Application of low cost skin substitute graft to trunk, arms, legs, total wound surface area greater than or equal to 100 sq cm; first 100 sq cm wound surface area, or 1% of body area of infants and children
Skin Substitute Graft Application	C5274	Application of low cost skin substitute graft to trunk, arms, legs, total wound surface area greater than or equal to 100 sq cm; each additional 100 sq cm wound surface area, or part thereof, or each additional 1% of body area of infants and children, or part thereof (list separately in addition to code for primary procedure)
Skin Substitute Graft Application	C5275	Application of low cost skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area up to 100 sq cm; first 25 sq cm or less wound surface area
Skin Substitute Graft Application	C5276	Application of low cost skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area up to 100 sq cm; each additional 25 sq cm wound surface area, or part thereof (list separately in addition to code for primary procedure)
Skin Substitute Graft Application	C5277	Application of low cost skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area greater than or equal to 100 sq cm; first 100 sq cm wound surface area, or 1% of body area of infants and children
Skin Substitute Graft Application	C5278	Application of low cost skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area greater than or equal to 100 sq cm; each additional 100 sq cm wound surface area, or part thereof, or each additional 1% of body area of infants and children, or part thereof (list separately in addition to code for primary procedure)

Miscellaneous Drugs, Biologicals, and Supplies

Miscellaneous Drugs, Biologicals, and Supplies	C9089	Bupivacaine, collagen-matrix implant, 1 mg
Miscellaneous Drugs, Biologicals, and Supplies	C9305	Injection, nipocalimab-aahu, 3 mg
Miscellaneous Drugs, Biologicals, and Supplies	C9306	Injection, telisotuzumab vedotin-tllv, 1 mg

Other Therapeutic Services and Supplies

Other Therapeutic Services and Supplies	C9751	Bronchoscopy, rigid or flexible, transbronchial ablation of lesion(s) by microwave energy, including fluoroscopic guidance, when performed, with computed tomography acquisition(s) and 3-d rendering, computer-assisted, image-guided navigation, and endobronchial ultrasound (ebus) guided transtracheal and/or transbronchial sampling (e.g., aspiration[s]/biopsy[ies]) and all mediastinal and/or hilar lymph node stations or structures and therapeutic intervention(s)
Other Therapeutic Services and Supplies	C9784	Gastric restrictive procedure, endoscopic sleeve gastropasty, with esophagogastroduodenoscopy and intraluminal tube insertion, if performed, including all system and tissue anchoring components

Telemed Services

Telemed Services	G0071	Payment for communication technology-based services for 5 minutes or more of a virtual (non-face-to-face) communication between an rural health clinic (rhc) or federally qualified health center (fqhc) practitioner and rhc or fqhc patient, or 5 minutes or more of remote evaluation of recorded video and/or images by an rhc or fqhc practitioner, occurring in lieu of an office visit; rhc or fqhc only
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Other Services

Other Services	G0511	Rural health clinic or federally qualified health center (rhc or fqhc) only, general care management, 20 minutes or more of clinical staff time for chronic care management services or behavioral health integration services directed by an rhc or fqhc practitioner (physician, np, pa, or cnm), per calendar month
Other Services	G0512	Rural health clinic or federally qualified health center (rhc/fqhc) only, psychiatric collaborative care model (psychiatric cocm), 60 minutes or more of clinical staff time for psychiatric cocm services directed by an rhc or fqhc practitioner (physician, np, pa, or cnm) and including services furnished by a behavioral health care manager and consultation with a psychiatric consultant, per calendar month

Radiation Therapy Services

Radiation Therapy Services	G6001	Ultrasonic guidance for placement of radiation therapy fields
Radiation Therapy Services	G6002	Stereoscopic x-ray guidance for localization of target volume for the delivery of radiation therapy
Radiation Therapy Services	G6003	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: up to 5 mev
Radiation Therapy Services	G6004	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: 6-10 mev
Radiation Therapy Services	G6005	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: 11-19 mev
Radiation Therapy Services	G6006	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: 20 mev or greater

Deleted HCPCS Codes for 2026

Speciality	HCPCS Code	Description
Radiation Therapy Services	G6007	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks; up to 5 mev
Radiation Therapy Services	G6008	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks: 6-10 mev
Radiation Therapy Services	G6009	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks: 11-19 mev
Radiation Therapy Services	G6010	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks: 20 mev or greater
Radiation Therapy Services	G6011	Radiation treatment delivery, 3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; up to 5 mev
Radiation Therapy Services	G6012	Radiation treatment delivery, 3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 6-10 mev
Radiation Therapy Services	G6013	Radiation treatment delivery, 3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 11-19 mev
Radiation Therapy Services	G6014	Radiation treatment delivery, 3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 20 mev or greater
Radiation Therapy Services	G6015	Intensity modulated treatment delivery, single or multiple fields/arcs, via narrow spatially and temporally modulated beams, binary, dynamic mlc, per treatment session
Radiation Therapy Services	G6016	Compensator-based beam modulation treatment delivery of inverse planned treatment using 3 or more high resolution (milled or cast) compensator, convergent beam modulated fields, per treatment session
Radiation Therapy Services	G6017	Intra-fraction localization and tracking of target or patient motion during delivery of radiation therapy (eg, 3d positional tracking, gating, 3d surface tracking), each fraction of treatment

Additional Assorted Quality Measures

Additional Assorted Quality Measures	G9604	Patient survey results not available
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Drugs, Administered by Injection

Drugs, Administered by Injection	J0172	Injection, aducanumab-avwa, 2 mg
Drugs, Administered by Injection	J0190	Injection, biperiden lactate, per 5 mg
Drugs, Administered by Injection	J0200	Injection, alatrofloxacin mesylate, 100 mg
Drugs, Administered by Injection	J0205	Injection, alglucerase, per 10 units
Drugs, Administered by Injection	J0215	Injection, alefacept, 0.5 mg
Drugs, Administered by Injection	J0288	Injection, amphotericin b cholesteryl sulfate complex, 10 mg
Drugs, Administered by Injection	J0350	Injection, anistreplase, per 30 units
Drugs, Administered by Injection	J0365	Injection, aprotonin, 10,000 kiu
Drugs, Administered by Injection	J0380	Injection, metaraminol bitartrate, per 10 mg
Drugs, Administered by Injection	J0395	Injection, arbutamine hcl, 1 mg
Drugs, Administered by Injection	J0710	Injection, cephalixin sodium, up to 1 gm
Drugs, Administered by Injection	J0715	Injection, ceftizoxime sodium, per 500 mg
Drugs, Administered by Injection	J0795	Injection, corticotropin ovine trifluacetate, 1 microgram
Drugs, Administered by Injection	J0889	Daprodustat, oral, 1 mg, (for esrd on dialysis)
Drugs, Administered by Injection	J1267	Injection, doripenem, 10 mg
Drugs, Administered by Injection	J1330	Injection, ergonovine maleate, up to 0.2 mg

Deleted HCPCS Codes for 2026

Speciality	HCPCS Code	Description
Drugs, Administered by Injection	J1443	Injection, ferric pyrophosphate citrate solution (triferic), 0.1 mg of iron
Drugs, Administered by Injection	J1444	Injection, ferric pyrophosphate citrate powder, 0.1 mg of iron
Drugs, Administered by Injection	J1445	Injection, ferric pyrophosphate citrate solution (triferic avnu), 0.1 mg of iron
Drugs, Administered by Injection	J1452	Injection, fomivirsen sodium, intraocular, 1.65 mg
Drugs, Administered by Injection	J1457	Injection, gallium nitrate, 1 mg
Drugs, Administered by Injection	J1562	Injection, immune globulin (vivaglobin), 100 mg
Drugs, Administered by Injection	J1572	Injection, immune globulin, (flebogamma/flebogamma dif), intravenous, non-lyophilized (e.g., liquid), 500 mg
Drugs, Administered by Injection	J1620	Injection, gonadorelin hydrochloride, per 100 mcg
Drugs, Administered by Injection	J1655	Injection, tinzaparin sodium, 1000 iu
Drugs, Administered by Injection	J1710	Injection, hydrocortisone sodium phosphate, up to 50 mg
Drugs, Administered by Injection	J1945	Injection, lepirudin, 50 mg
Drugs, Administered by Injection	J2504	Injection, pegademase bovine, 25 iu
Drugs, Administered by Injection	J2513	Injection, pentastarch, 10% solution, 100 ml
Drugs, Administered by Injection	J2910	Injection, aurothioglucose, up to 50 mg
Drugs, Administered by Injection	J2940	Injection, somatrem, 1 mg
Drugs, Administered by Injection	J2995	Injection, streptokinase, per 250,000 iu
Drugs, Administered by Injection	J3280	Injection, thiethylperazine maleate, up to 10 mg
Drugs, Administered by Injection	J3305	Injection, trimetrexate glucuronate, per 25 mg
Drugs, Administered by Injection	J3310	Injection, perphenazine, up to 5 mg
Drugs, Administered by Injection	J3320	Injection, spectinomycin dihydrochloride, up to 2 gm
Drugs, Administered by Injection	J3355	Injection, urofollitropin, 75 iu
Drugs, Administered by Injection	J3364	Injection, urokinase, 5000 iu vial
Drugs, Administered by Injection	J3365	Injection, iv, urokinase, 250,000 i.u. vial
Drugs, Administered by Injection	J3400	Injection, triflupromazine hcl, up to 20 mg

Miscellaneous Drug

Miscellaneous Drugs	J7309	Methyl aminolevulinate (mal) for topical administration, 16.8%, 1 gram
Miscellaneous Drugs	J7310	Ganciclovir, 4.5 mg, long-acting implant

Immunosuppressive Drugs

Immunosuppressive Drugs	J7505	Muromonab-cd3, parenteral, 5 mg
Immunosuppressive Drugs	J7513	Daclizumab, parenteral, 25 mg

Deleted HCPCS Codes for 2026

Specialty	HCPCS Code	Description
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Chemotherapy Drugs, Oral Administration

Chemotherapy Drugs, Oral Administration	J8562	Fludarabine phosphate, oral, 10 mg
Chemotherapy Drugs, Oral Administration	J8650	Nabilone, oral, 1 mg

Chemotherapy Drugs

Chemotherapy Drugs	J9019	Injection, asparaginase (erwinaze), 1,000 iu
Chemotherapy Drugs	J9020	Injection, asparaginase, not otherwise specified, 10,000 units
Chemotherapy Drugs	J9098	Injection, cytarabine liposome, 10 mg
Chemotherapy Drugs	J9151	Injection, daunorubicin citrate, liposomal formulation, 10 mg
Chemotherapy Drugs	J9165	Injection, diethylstilbestrol diphosphate, 250 mg
Chemotherapy Drugs	J9212	Injection, interferon alfacon-1, recombinant, 1 microgram
Chemotherapy Drugs	J9270	Injection, plicamycin, 2.5 mg

Chemotherapy Anti-emetic Medications

Chemotherapy Anti-emetic Medications	Q0174	Thiethylperazine maleate, 10 mg, oral, fda approved prescription anti-emetic, for use as a complete therapeutic substitute for an iv anti-emetic at the time of chemotherapy treatment, not to exceed a 48 hour dosage regimen
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Miscellaneous Drug and New Technology Codes

Miscellaneous Drug and New Technology Codes	Q2017	Injection, teniposide, 50 mg
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Skin Substitutes and Biologicals

Skin Substitutes and Biologicals	Q4100	Skin substitute, not otherwise specified
Skin Substitutes and Biologicals	Q4106	Dermagraft, per square centimeter

Anti-Inflammatory Medication and Chemotherapy Medication

Anti-Inflammatory Medication and Chemotherapy Medication	Q5109	Injection, infliximab-qbt, biosimilar, (ixifi), 10 mg
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Contrast Agents/Diagnostic Imaging

Contrast Agents/Diagnostic Imaging	Q9969	Tc-99m from non-highly enriched uranium source, full cost recovery add-on, per study dose
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Non-Medicare Drug Codes

Non-Medicare Drug Codes	S0013	Esketamine, nasal spray, 1 mg
Non-Medicare Drug Codes	S0080	Injection, pentamidine isethionate, 300 mg

BONUS: ICD-10 Codes for 2026

Below are the ICD-10 code updates. This list includes revised codes, new codes, and deleted codes.

Speciality	New	Revised	Deleted
Total ICD-10 code changes for 2025	487	38	28
Chapter 1: Certain Parasitic and Infectious Diseases	2	0	1
Chapter 2: Neoplasms	3	0	1
Chapter 3: Diseases of the Blood and Blood Forming Organs	3	0	0
Chapter 4: Endocrine, Nutritional and Metabolic Diseases	23	0	0
Chapter 5: Mental, Behavioral and Neurodevelopmental Disorders	0	0	0
Chapter 6: Diseases of the Nervous System	10	0	1
Chapter 7: Diseases of the Eye and Adnexa	17	0	1
Chapter 8: Diseases of the Ear and Mastoid Process	0	0	0
Chapter 9: Diseases of Circulatory System	4	0	0
Chapter 10: Diseases of the Respiratory System	0	0	0
Chapter 11: Diseases of the Digestive System	0	0	0
Chapter 12: Diseases of the Skin and Subcutaneous Tissue	116	2	0
Chapter 13: Diseases of the Musculoskeletal System and Connective Tissue	1	3	0
Chapter 14: Diseases of the Genitourinary System	5	0	0
Chapter 15: Pregnancy, Childbirth and the Puerperium	0	0	0
Chapter 16: Certain Conditions Originating in the Perinatal Period	0	1	0
Chapter 17: Congenital Malformations, Deformations and Chromosomal Abnormalities	23	6	2
Chapter 18: Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	21	0	2
Chapter 19: Injury, Poisoning and Certain Other Consequences of External Causes	213	24	12
Chapter 20: External Causes of Morbidity	20	1	0
Chapter 21: Factors Influencing Health Status and Contact with Health Services	26	1	5
Chapter 22: Codes for Special Purposes	0	0	0

DISCLAIMER:

THIS REFERENCE GUIDE HIGHLIGHTS NEW, REVISED, AND DELETED ICD-10-CM DIAGNOSIS CODES. CHAPTERS WITHOUT CODING CHANGES HAVE BEEN INTENTIONALLY OMITTED. FOR COMPREHENSIVE INFORMATION AND CORRELATING CHAPTERS, PLEASE REFER TO THE OFFICIAL ICD-10-CM CODE BOOK.

New ICD-10 Codes for 2026

System	ICD-10 Code	Description
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Chapter 1: Certain Parasitic and Infectious Diseases

Certain Parasitic and Infectious Diseases	B88.01	Infestation by Demodex mites
Certain Parasitic and Infectious Diseases	B88.09	Other acariasis

Chapter 2: Neoplasms

Neoplasms	C50A0	Malignant inflammatory neoplasm of unspecified breast
Neoplasms	C50A1	Malignant inflammatory neoplasm of right breast
Neoplasms	C50A2	Malignant inflammatory neoplasm of left breast

Chapter 3: Diseases of the Blood and Blood Forming Organs

Diseases of the Blood and Blood Forming Organs	D71.1	Leukocyte adhesion deficiency
Diseases of the Blood and Blood Forming Organs	D71.8	Other functional disorders of polymorphonuclear neutrophils
Diseases of the Blood and Blood Forming Organs	D71.9	Functional disorders of polymorphonuclear neutrophils, unspecified

Chapter 4: Endocrine, Nutritional and Metabolic Diseases

Endocrine, Nutritional and Metabolic Diseases	E11.A	Type 2 diabetes mellitus without complications in remission
Endocrine, Nutritional and Metabolic Diseases	E72.530	Primary hyperoxaluria, type 1
Endocrine, Nutritional and Metabolic Diseases	E72.538	Other specified primary hyperoxaluria
Endocrine, Nutritional and Metabolic Diseases	E72.539	Primary hyperoxaluria, unspecified
Endocrine, Nutritional and Metabolic Diseases	E72.540	Dietary hyperoxaluria
Endocrine, Nutritional and Metabolic Diseases	E72.541	Enteric hyperoxaluria
Endocrine, Nutritional and Metabolic Diseases	E72.548	Other secondary hyperoxaluria
Endocrine, Nutritional and Metabolic Diseases	E72.549	Secondary hyperoxaluria, unspecified
Endocrine, Nutritional and Metabolic Diseases	E78.010	Homozygous familial hypercholesterolemia [HoFH]
Endocrine, Nutritional and Metabolic Diseases	E78.011	Heterozygous familial hypercholesterolemia [HeFH]
Endocrine, Nutritional and Metabolic Diseases	E78.019	Familial hypercholesterolemia, unspecified
Endocrine, Nutritional and Metabolic Diseases	E83.820	Generalized arterial calcification of infancy with unspecified genetic causality
Endocrine, Nutritional and Metabolic Diseases	E83.821	ENPP1 deficiency causing generalized arterial calcification of infancy
Endocrine, Nutritional and Metabolic Diseases	E83.822	ENPP1 deficiency causing autosomal recessive hypophosphatemia rickets type 2
Endocrine, Nutritional and Metabolic Diseases	E83.823	ABCC6 deficiency causing generalized arterial calcification of infancy
Endocrine, Nutritional and Metabolic Diseases	E83.824	ABCC6 deficiency causing pseudoxanthoma elasticum
Endocrine, Nutritional and Metabolic Diseases	E83.825	CD73 deficiency causing arterial calcification
Endocrine, Nutritional and Metabolic Diseases	E88.10	Lipodystrophy, unspecified
Endocrine, Nutritional and Metabolic Diseases	E88.11	Partial lipodystrophy
Endocrine, Nutritional and Metabolic Diseases	E88.12	Generalized lipodystrophy
Endocrine, Nutritional and Metabolic Diseases	E88.13	Localized lipodystrophy
Endocrine, Nutritional and Metabolic Diseases	E88.14	HIV-associated lipodystrophy
Endocrine, Nutritional and Metabolic Diseases	E88.19	Other lipodystrophy, not elsewhere classified

Chapter 6: Diseases of the Nervous System

Diseases of the Nervous System	G31.87	Primary progressive apraxia of speech
Diseases of the Nervous System	G35.A	Relapsing-remitting multiple sclerosis
Diseases of the Nervous System	G35.B0	Primary progressive multiple sclerosis, unspecified
Diseases of the Nervous System	G35.B1	Active primary progressive multiple sclerosis
Diseases of the Nervous System	G35.B2	Non-active primary progressive multiple sclerosis
Diseases of the Nervous System	G35.C0	Secondary progressive multiple sclerosis, unspecified
Diseases of the Nervous System	G35.C1	Active secondary progressive multiple sclerosis
Diseases of the Nervous System	G35.C2	Non-active secondary progressive multiple sclerosis
Diseases of the Nervous System	G35.D	Multiple sclerosis, unspecified

New ICD-10 Codes for 2026

System	ICD-10 Code	Description
Diseases of the Nervous System	G71.036	Limb girdle muscular dystrophy due to fukutin related protein dysfunction

Chapter 7: Diseases of the Eye and Adnexa

Diseases of the Eye and Adnexa	G71.036	Limb girdle muscular dystrophy due to fukutin related protein dysfunction
Diseases of the Eye and Adnexa	H01.81	Other specified inflammation of right upper eyelid
Diseases of the Eye and Adnexa	H01.82	Other specified inflammation of right lower eyelid
Diseases of the Eye and Adnexa	H01.83	Other specified inflammation of right eye, unspecified eyelid
Diseases of the Eye and Adnexa	H01.84	Other specified inflammation of left upper eyelid
Diseases of the Eye and Adnexa	H01.85	Other specified inflammation of left lower eyelid
Diseases of the Eye and Adnexa	H01.86	Other specified inflammation of left eye, unspecified eyelid
Diseases of the Eye and Adnexa	H01.89	Other specified inflammation of unspecified eye, unspecified eyelid
Diseases of the Eye and Adnexa	H01.8A	Other specified inflammation of right eye, upper and lower eyelids
Diseases of the Eye and Adnexa	H01.8B	Other specified inflammation of left eye, upper and lower eyelids
Diseases of the Eye and Adnexa	H05.831	Thyroid orbitopathy, right orbit
Diseases of the Eye and Adnexa	H05.832	Thyroid orbitopathy, left orbit
Diseases of the Eye and Adnexa	H05.833	Thyroid orbitopathy, bilateral
Diseases of the Eye and Adnexa	H05.839	Thyroid orbitopathy, unspecified orbit
Diseases of the Eye and Adnexa	H40.841	Neovascular secondary angle closure glaucoma, right eye
Diseases of the Eye and Adnexa	H40.842	Neovascular secondary angle closure glaucoma, left eye
Diseases of the Eye and Adnexa	H40.843	Neovascular secondary angle closure glaucoma, bilateral
Diseases of the Eye and Adnexa	H40.849	Neovascular secondary angle closure glaucoma, unspecified eye
Diseases of the Eye and Adnexa	C88.81	Other malignant immunoproliferative diseases, in remission

Chapter 9: Diseases of Circulatory System

Diseases of Circulatory System	I27.840	Fontan-associated liver disease [FALD]
Diseases of Circulatory System	I27.841	Fontan-associated lymphatic dysfunction
Diseases of Circulatory System	I27.848	Other Fontan-associated condition
Diseases of Circulatory System	I27.849	Fontan related circulation, unspecified

Chapter 12: Diseases of the Skin and Subcutaneous Tissue

Diseases of the Skin and Subcutaneous Tissue	L02.217	Cutaneous abscess of flank
Diseases of the Skin and Subcutaneous Tissue	L02.227	Furuncle of flank
Diseases of the Skin and Subcutaneous Tissue	L03.31A	Cellulitis of flank
Diseases of the Skin and Subcutaneous Tissue	L03.32A	Acute lymphangitis of flank
Diseases of the Skin and Subcutaneous Tissue	L98.431	Non-pressure chronic ulcer of abdomen limited to breakdown of skin
Diseases of the Skin and Subcutaneous Tissue	L98.432	Non-pressure chronic ulcer of abdomen with fat layer exposed
Diseases of the Skin and Subcutaneous Tissue	L98.433	Non-pressure chronic ulcer of abdomen with necrosis of muscle
Diseases of the Skin and Subcutaneous Tissue	L98.434	Non-pressure chronic ulcer of abdomen with necrosis of bone
Diseases of the Skin and Subcutaneous Tissue	L98.435	Non-pressure chronic ulcer of abdomen with muscle involvement without evidence of necrosis
Diseases of the Skin and Subcutaneous Tissue	L98.436	Non-pressure chronic ulcer of abdomen with bone involvement without evidence of necrosis
Diseases of the Skin and Subcutaneous Tissue	L98.438	Non-pressure chronic ulcer of abdomen with other specified severity
Diseases of the Skin and Subcutaneous Tissue	L98.439	Non-pressure chronic ulcer of abdomen with unspecified severity
Diseases of the Skin and Subcutaneous Tissue	L98.441	Non-pressure chronic ulcer of chest limited to breakdown of skin
Diseases of the Skin and Subcutaneous Tissue	L98.442	Non-pressure chronic ulcer of chest with fat layer exposed
Diseases of the Skin and Subcutaneous Tissue	L98.443	Non-pressure chronic ulcer of chest with necrosis of muscle
Diseases of the Skin and Subcutaneous Tissue	L98.444	Non-pressure chronic ulcer of chest with necrosis of bone
Diseases of the Skin and Subcutaneous Tissue	L98.445	Non-pressure chronic ulcer of chest with muscle involvement without evidence of necrosis
Diseases of the Skin and Subcutaneous Tissue	L98.446	Non-pressure chronic ulcer of chest with bone involvement without evidence of necrosis
Diseases of the Skin and Subcutaneous Tissue	L98.448	Non-pressure chronic ulcer of chest with other specified severity
Diseases of the Skin and Subcutaneous Tissue	L98.449	Non-pressure chronic ulcer of chest with unspecified severity
Diseases of the Skin and Subcutaneous Tissue	L98.451	Non-pressure chronic ulcer of neck limited to breakdown of skin

New ICD-10 Codes for 2026

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System	ICD-10 Code	Description
Diseases of the Skin and Subcutaneous Tissue	L98.A213	Non-pressure chronic ulcer of right forearm with necrosis of muscle
Diseases of the Skin and Subcutaneous Tissue	L98.A214	Non-pressure chronic ulcer of right forearm with necrosis of bone
Diseases of the Skin and Subcutaneous Tissue	L98.A215	Non-pressure chronic ulcer of right forearm with muscle involvement without evidence of necrosis
Diseases of the Skin and Subcutaneous Tissue	L98.A216	Non-pressure chronic ulcer of right forearm with bone involvement without evidence of necrosis
Diseases of the Skin and Subcutaneous Tissue	L98.A218	Non-pressure chronic ulcer of right forearm with other specified severity
Diseases of the Skin and Subcutaneous Tissue	L98.A219	Non-pressure chronic ulcer of right forearm with unspecified severity
Diseases of the Skin and Subcutaneous Tissue	L98.A221	Non-pressure chronic ulcer of left forearm limited to breakdown of skin
Diseases of the Skin and Subcutaneous Tissue	L98.A222	Non-pressure chronic ulcer of left forearm with fat layer exposed
Diseases of the Skin and Subcutaneous Tissue	L98.A223	Non-pressure chronic ulcer of left forearm with necrosis of muscle
Diseases of the Skin and Subcutaneous Tissue	L98.A224	Non-pressure chronic ulcer of left forearm with necrosis of bone
Diseases of the Skin and Subcutaneous Tissue	L98.A225	Non-pressure chronic ulcer of left forearm with muscle involvement without evidence of necrosis
Diseases of the Skin and Subcutaneous Tissue	L98.A226	Non-pressure chronic ulcer of left forearm with bone involvement without evidence of necrosis
Diseases of the Skin and Subcutaneous Tissue	L98.A228	Non-pressure chronic ulcer of left forearm with other specified severity
Diseases of the Skin and Subcutaneous Tissue	L98.A229	Non-pressure chronic ulcer of left forearm with unspecified severity
Diseases of the Skin and Subcutaneous Tissue	L98.A291	Non-pressure chronic ulcer of unspecified forearm limited to breakdown of skin
Diseases of the Skin and Subcutaneous Tissue	L98.A292	Non-pressure chronic ulcer of unspecified forearm with fat layer exposed
Diseases of the Skin and Subcutaneous Tissue	L98.A293	Non-pressure chronic ulcer of unspecified forearm with necrosis of muscle
Diseases of the Skin and Subcutaneous Tissue	L98.A294	Non-pressure chronic ulcer of unspecified forearm with necrosis of bone
Diseases of the Skin and Subcutaneous Tissue	L98.A295	Non-pressure chronic ulcer of unspecified forearm with muscle involvement without evidence of necrosis
Diseases of the Skin and Subcutaneous Tissue	L98.A296	Non-pressure chronic ulcer of unspecified forearm with bone involvement without evidence of necrosis
Diseases of the Skin and Subcutaneous Tissue	L98.A298	Non-pressure chronic ulcer of unspecified forearm with other specified severity
Diseases of the Skin and Subcutaneous Tissue	L98.A299	Non-pressure chronic ulcer of unspecified forearm with unspecified severity
Diseases of the Skin and Subcutaneous Tissue	L98.A311	Non-pressure chronic ulcer of right hand limited to breakdown of skin
Diseases of the Skin and Subcutaneous Tissue	L98.A312	Non-pressure chronic ulcer of right hand with fat layer exposed
Diseases of the Skin and Subcutaneous Tissue	L98.A313	Non-pressure chronic ulcer of right hand with necrosis of muscle
Diseases of the Skin and Subcutaneous Tissue	J34.8200	Internal nasal valve collapse, unspecified
Diseases of the Skin and Subcutaneous Tissue	J34.8201	Internal nasal valve collapse, static
Diseases of the Skin and Subcutaneous Tissue	J34.8202	Internal nasal valve collapse, dynamic
Diseases of the Skin and Subcutaneous Tissue	L98.A314	Non-pressure chronic ulcer of right hand with necrosis of bone
Diseases of the Skin and Subcutaneous Tissue	L98.A315	Non-pressure chronic ulcer of right hand with muscle involvement without evidence of necrosis
Diseases of the Skin and Subcutaneous Tissue	L98.A316	Non-pressure chronic ulcer of right hand with bone involvement without evidence of necrosis
Diseases of the Skin and Subcutaneous Tissue	L98.A318	Non-pressure chronic ulcer of right hand with other specified severity
Diseases of the Skin and Subcutaneous Tissue	L98.A319	Non-pressure chronic ulcer of right hand with unspecified severity
Diseases of the Skin and Subcutaneous Tissue	L98.A321	Non-pressure chronic ulcer of left hand limited to breakdown of skin
Diseases of the Skin and Subcutaneous Tissue	L98.A322	Non-pressure chronic ulcer of left hand with fat layer exposed
Diseases of the Skin and Subcutaneous Tissue	L98.A323	Non-pressure chronic ulcer of left hand with necrosis of muscle
Diseases of the Skin and Subcutaneous Tissue	L98.A324	Non-pressure chronic ulcer of left hand with necrosis of bone
Diseases of the Skin and Subcutaneous Tissue	L98.A325	Non-pressure chronic ulcer of left hand with muscle involvement without evidence of necrosis
Diseases of the Skin and Subcutaneous Tissue	L98.A326	Non-pressure chronic ulcer of left hand with bone involvement without evidence of necrosis
Diseases of the Skin and Subcutaneous Tissue	L98.A328	Non-pressure chronic ulcer of left hand with other specified severity
Diseases of the Skin and Subcutaneous Tissue	L98.A329	Non-pressure chronic ulcer of left hand with unspecified severity
Diseases of the Skin and Subcutaneous Tissue	L98.A391	Non-pressure chronic ulcer of unspecified hand limited to breakdown of skin
Diseases of the Skin and Subcutaneous Tissue	L98.A392	Non-pressure chronic ulcer of unspecified hand with fat layer exposed
Diseases of the Skin and Subcutaneous Tissue	L98.A393	Non-pressure chronic ulcer of unspecified hand with necrosis of muscle
Diseases of the Skin and Subcutaneous Tissue	L98.A394	Non-pressure chronic ulcer of unspecified hand with necrosis of bone
Diseases of the Skin and Subcutaneous Tissue	L98.A395	Non-pressure chronic ulcer of unspecified hand with muscle involvement without evidence of necrosis
Diseases of the Skin and Subcutaneous Tissue	L98.A396	Non-pressure chronic ulcer of unspecified hand with bone involvement without evidence of necrosis

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System	ICD-10 Code	Description
Diseases of the Skin and Subcutaneous Tissue	L98.A398	Non-pressure chronic ulcer of unspecified hand with other specified severity
Diseases of the Skin and Subcutaneous Tissue	L98.A399	Non-pressure chronic ulcer of unspecified hand with unspecified severity

Chapter 13: Diseases of the Musculoskeletal System and Connective Tissue

Diseases of the Musculoskeletal System and Connective Tissue	M05.A	Abnormal rheumatoid factor and anti-citrullinated protein antibody with rheumatoid arthritis
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Chapter 14: Diseases of the Genitourinary System

Diseases of the Genitourinary System	N00.B1	Acute nephritic syndrome with idiopathic immune membranoproliferative glomerulonephritis (IC-MPGN)
Diseases of the Genitourinary System	N00.B2	Acute nephritic syndrome with secondary immune complex membranoproliferative glomerulonephritis (IC-MPGN)
Diseases of the Genitourinary System	N04.B1	Nephrotic syndrome with idiopathic immune complex membranoproliferative glomerulonephritis (IC-MPGN)
Diseases of the Genitourinary System	N04.B2	Nephrotic syndrome with secondary immune complex membranoproliferative glomerulonephritis (IC-MPGN)
Diseases of the Genitourinary System	N07.B	Hereditary nephropathy, not elsewhere classified with APOL1-mediated kidney disease [AMKD]

Chapter 17: Congenital Malformations, Deformations and Chromosomal Abnormalities

Congenital Malformations, Deformations and Chromosomal Abnormalities	Q87.87	Hao-Fountain Syndrome
Congenital Malformations, Deformations and Chromosomal Abnormalities	Q87.88	CTNNB1 syndrome
Congenital Malformations, Deformations and Chromosomal Abnormalities	Q89.81	Kabuki syndrome
Congenital Malformations, Deformations and Chromosomal Abnormalities	Q89.89	Other specified congenital malformations
Congenital Malformations, Deformations and Chromosomal Abnormalities	Q99.811	Usher syndrome, type 1
Congenital Malformations, Deformations and Chromosomal Abnormalities	Q99.812	Usher syndrome, type 2
Congenital Malformations, Deformations and Chromosomal Abnormalities	Q99.813	Usher syndrome, type 3
Congenital Malformations, Deformations and Chromosomal Abnormalities	Q99.818	Other Usher syndrome
Congenital Malformations, Deformations and Chromosomal Abnormalities	Q99.819	Usher syndrome, unspecified
Congenital Malformations, Deformations and Chromosomal Abnormalities	Q99.89	Other specified chromosome abnormalities
Congenital Malformations, Deformations and Chromosomal Abnormalities	QA0.0101	SCN2A-related neurodevelopmental disorder
Congenital Malformations, Deformations and Chromosomal Abnormalities	QA0.0102	CACNA1A-related neurodevelopmental disorder
Congenital Malformations, Deformations and Chromosomal Abnormalities	QA0.0109	Neurodevelopmental disorder related to pathogenic variant in other ion channel gene
Congenital Malformations, Deformations and Chromosomal Abnormalities	QA0.011	Neurodevelopmental disorders, related to pathogenic variants in glutamate receptor genes
Congenital Malformations, Deformations and Chromosomal Abnormalities	QA0.012	Neurodevelopmental disorders, related to pathogenic variants in other receptor genes
Congenital Malformations, Deformations and Chromosomal Abnormalities	QA0.0131	SLC6A1-related disorder
Congenital Malformations, Deformations and Chromosomal Abnormalities	QA0.0139	Neurodevelopmental disorder, related to pathogenic variant in other transporter or solute carrier gene
Congenital Malformations, Deformations and Chromosomal Abnormalities	QA0.0141	Syntaxin-binding protein 1-related disorder
Congenital Malformations, Deformations and Chromosomal Abnormalities	QA0.0142	DLG4-related Synaptopathy
Congenital Malformations, Deformations and Chromosomal Abnormalities	QA0.0149	Neurodevelopmental disorder, related to pathogenic variant in other synapse related gene
Congenital Malformations, Deformations and Chromosomal Abnormalities	QA0.0151	FOXP1 syndrome

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System	ICD-10 Code	Description
Congenital Malformations, Deformations and Chromosomal Abnormalities	QA0.0159	Neurodevelopmental disorder, related to other genes associated with transcription and gene expression
Congenital Malformations, Deformations and Chromosomal Abnormalities	QA0.8	Other neurodevelopmental disorders related to pathogenic variants in other specific genes

Chapter 18: Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified

Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	R10.20	Pelvic and perineal pain unspecified side
Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	R10.21	Pelvic and perineal pain right side
Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	R10.22	Pelvic and perineal pain left side
Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	R10.23	Pelvic and perineal pain bilateral
Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	R10.24	Suprapubic pain
Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	R10.85	Abdominal pain of multiple sites
Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	R10.8A1	Right flank tenderness
Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	R10.8A2	Left flank tenderness
Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	R10.8A3	Suprapubic tenderness
Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	R10.8A9	Flank tenderness, unspecified
Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	R10.A0	Flank pain, unspecified side
Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	R10.A1	Flank pain, right side
Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	R10.A2	Flank pain, left side
Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	R10.A3	Flank pain, bilateral
Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	R11.16	Cannabis hyperemesis syndrome
Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	R39.851	Costovertebral (angle) tenderness, right side
Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	R39.852	Costovertebral (angle) tenderness, left side
Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	R39.853	Costovertebral (angle) tenderness, bilateral
Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	R39.859	Costovertebral (angle) tenderness, unspecified side
Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	R76.81	Abnormal rheumatoid factor and anti-citrullinated protein antibody without rheumatoid arthritis
Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	R76.89	Other specified abnormal immunological findings in serum

Chapter 19: Injury, Poisoning and Certain Other Consequences of External Causes

Injury, Poisoning and Certain Other Consequences of External Causes	S30.11XA	Contusion of abdominal wall, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S30.11XD	Contusion of abdominal wall, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S30.11XS	Contusion of abdominal wall, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	S30.12XA	Contusion of groin, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S30.12XD	Contusion of groin, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S30.12XS	Contusion of groin, sequela

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System	ICD-10 Code	Description
Injury, Poisoning and Certain Other Consequences of External Causes	S30.13XA	Contusion of flank (latus) region, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S30.13XD	Contusion of flank (latus) region, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S30.13XS	Contusion of flank (latus) region, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	S30.81AA	Abrasion of flank, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S30.81AD	Abrasion of flank, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S30.81AS	Abrasion of flank, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	S30.82AA	Blister (nonthermal) of flank, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S30.82AD	Blister (nonthermal) of flank, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S30.82AS	Blister (nonthermal) of flank, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	S30.84AA	External constriction of flank, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S30.84AD	External constriction of flank, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S30.84AS	External constriction of flank, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	S30.85AA	Superficial foreign body of flank, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S30.85AD	Superficial foreign body of flank, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S30.85AS	Superficial foreign body of flank, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	S30.86AA	Insect bite (nonvenomous) of flank, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S30.86AD	Insect bite (nonvenomous) of flank, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S30.86AS	Insect bite (nonvenomous) of flank, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	S30.87AA	Other superficial bite of flank, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S30.87AD	Other superficial bite of flank, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S30.87AS	Other superficial bite of flank, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	S30.9AXA	Unspecified superficial injury of flank, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S30.9AXD	Unspecified superficial injury of flank, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S30.9AXS	Unspecified superficial injury of flank, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	S31.106A	Unspecified open wound of abdominal wall, right flank without penetration into peritoneal cavity, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S31.106D	Unspecified open wound of abdominal wall, right flank without penetration into peritoneal cavity, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S31.106S	Unspecified open wound of abdominal wall, right flank without penetration into peritoneal cavity, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	S31.107A	Unspecified open wound of abdominal wall, left flank without penetration into peritoneal cavity, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S31.107D	Unspecified open wound of abdominal wall, left flank without penetration into peritoneal cavity, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S31.107S	Unspecified open wound of abdominal wall, left flank without penetration into peritoneal cavity, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	S31.10AA	Unspecified open wound of abdominal wall, unspecified flank without penetration into peritoneal cavity, initial encounter

New ICD-10 Codes for 2026

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New ICD-10 Codes for 2026

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New ICD-10 Codes for 2026

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New ICD-10 Codes for 2026

System	ICD-10 Code	Description
Injury, Poisoning and Certain Other Consequences of External Causes	S31.656D	Open bite of abdominal wall, right flank with penetration into peritoneal cavity, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S31.656S	Open bite of abdominal wall, right flank with penetration into peritoneal cavity, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	S31.657A	Open bite of abdominal wall, left flank with penetration into peritoneal cavity, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S31.657D	Open bite of abdominal wall, left flank with penetration into peritoneal cavity, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S31.657S	Open bite of abdominal wall, left flank with penetration into peritoneal cavity, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	S31.65AA	Open bite of abdominal wall, unspecified flank with penetration into peritoneal cavity, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S31.65AD	Open bite of abdominal wall, unspecified flank with penetration into peritoneal cavity, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S31.65AS	Open bite of abdominal wall, unspecified flank with penetration into peritoneal cavity, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T36.AX1A	Poisoning by fluoroquinolone antibiotics, accidental (unintentional), initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T36.AX1D	Poisoning by fluoroquinolone antibiotics, accidental (unintentional), subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T36.AX1S	Poisoning by fluoroquinolone antibiotics, accidental (unintentional), sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T36.AX2A	Poisoning by fluoroquinolone antibiotics, intentional self-harm, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T36.AX2D	Poisoning by fluoroquinolone antibiotics, intentional self-harm, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T36.AX2S	Poisoning by fluoroquinolone antibiotics, intentional self-harm, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T36.AX3A	Poisoning by fluoroquinolone antibiotics, assault, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T36.AX3D	Poisoning by fluoroquinolone antibiotics, assault, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T36.AX3S	Poisoning by fluoroquinolone antibiotics, assault, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T36.AX4A	Poisoning by fluoroquinolone antibiotics, undetermined, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T36.AX4D	Poisoning by fluoroquinolone antibiotics, undetermined, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T36.AX4S	Poisoning by fluoroquinolone antibiotics, undetermined, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T36.AX5A	Adverse effect of fluoroquinolone antibiotics, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T36.AX5D	Adverse effect of fluoroquinolone antibiotics, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T36.AX5S	Adverse effect of fluoroquinolone antibiotics, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T36.AX6A	Underdosing of fluoroquinolone antibiotics, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T36.AX6D	Underdosing of fluoroquinolone antibiotics, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T36.AX6S	Underdosing of fluoroquinolone antibiotics, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T65.841A	Toxic effect of xylazine, accidental (unintentional), initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T65.841D	Toxic effect of xylazine, accidental (unintentional), subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T65.841S	Toxic effect of xylazine, accidental (unintentional), sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T65.842A	Toxic effect of xylazine, intentional self-harm, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T65.842D	Toxic effect of xylazine, intentional self-harm, subsequent encounter

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System	ICD-10 Code	Description
Injury, Poisoning and Certain Other Consequences of External Causes	T65.842S	Toxic effect of xylazine, intentional self-harm, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T65.843A	Toxic effect of xylazine, assault, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T65.843D	Toxic effect of xylazine, assault, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T65.843S	Toxic effect of xylazine, assault, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T65.844A	Toxic effect of xylazine, undetermined, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T65.844D	Toxic effect of xylazine, undetermined, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T65.844S	Toxic effect of xylazine, undetermined, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T75.830A	Gulf war illness, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T75.830D	Gulf war illness, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T75.830S	Gulf war illness, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T75.838A	Effects of other war theater, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T75.838D	Effects of other war theater, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T75.838S	Effects of other war theater, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T78.070A	Anaphylactic reaction due to milk and dairy products with tolerance to baked milk, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.070D	Anaphylactic reaction due to milk and dairy products with tolerance to baked milk, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.070S	Anaphylactic reaction due to milk and dairy products with tolerance to baked milk, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T78.071A	Anaphylactic reaction due to milk and dairy products with reactivity to baked milk, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.071D	Anaphylactic reaction due to milk and dairy products with reactivity to baked milk, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.071S	Anaphylactic reaction due to milk and dairy products with reactivity to baked milk, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T78.079A	Anaphylactic reaction due to milk and dairy products, unspecified, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.079D	Anaphylactic reaction due to milk and dairy products, unspecified, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.079S	Anaphylactic reaction due to milk and dairy products, unspecified, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T78.080A	Anaphylactic reaction due to egg with tolerance to baked egg, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.080D	Anaphylactic reaction due to egg with tolerance to baked egg, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.080S	Anaphylactic reaction due to egg with tolerance to baked egg, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T78.081A	Anaphylactic reaction due to egg with reactivity to baked egg, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.081D	Anaphylactic reaction due to egg with reactivity to baked egg, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.081S	Anaphylactic reaction due to egg with reactivity to baked egg, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T78.089A	Anaphylactic reaction due to eggs, unspecified, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.089D	Anaphylactic reaction due to eggs, unspecified, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.089S	Anaphylactic reaction due to eggs, unspecified, sequela

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System	ICD-10 Code	Description
Injury, Poisoning and Certain Other Consequences of External Causes	T78.110A	Other adverse food reactions due to milk and dairy products with tolerance to baked milk, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.110D	Other adverse food reactions due to milk and dairy products with tolerance to baked milk, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.110S	Other adverse food reactions due to milk and dairy products with tolerance to baked milk, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T78.111A	Other adverse food reaction due to milk and dairy products with reactivity to baked milk, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.111D	Other adverse food reaction due to milk and dairy products with reactivity to baked milk, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.111S	Other adverse food reaction due to milk and dairy products with reactivity to baked milk, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T78.119A	Other adverse food reaction due to milk and dairy products with baked milk tolerance/reactivity, unspecified, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.119D	Other adverse food reaction due to milk and dairy products with baked milk tolerance/reactivity, unspecified, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.119S	Other adverse food reaction due to milk and dairy products with baked milk tolerance/reactivity, unspecified, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T78.120A	Other adverse food reaction due to egg with tolerance to baked egg, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.120D	Other adverse food reaction due to egg with tolerance to baked egg, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.120S	Other adverse food reaction due to egg with tolerance to baked egg, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T78.121A	Other adverse food reaction due to egg with reactivity to baked egg, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.121D	Other adverse food reaction due to egg with reactivity to baked egg, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.121S	Other adverse food reaction due to egg with reactivity to baked egg, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T78.129A	Other adverse food reaction due to egg with baked egg tolerance/reactivity, unspecified, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.129D	Other adverse food reaction due to egg with baked egg tolerance/reactivity, unspecified, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.129S	Other adverse food reaction due to egg with baked egg tolerance/reactivity, unspecified, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T78.19XA	Other adverse food reactions, not elsewhere classified, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.19XD	Other adverse food reactions, not elsewhere classified, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.19XS	Other adverse food reactions, not elsewhere classified, sequela

Chapter 20: External Causes of Morbidity

External Causes of Morbidity	W44.H9XA	Other sharp object entering into or through a natural orifice, initial encounter
External Causes of Morbidity	W44.H9XD	Other sharp object entering into or through a natural orifice, subsequent encounter
External Causes of Morbidity	W44.H9XS	Other sharp object entering into or through a natural orifice, sequela
External Causes of Morbidity	W45.3XXA	Fishing hook entering through skin, initial encounter
External Causes of Morbidity	W45.3XXD	Fishing hook entering through skin, subsequent encounter
External Causes of Morbidity	W45.3XXS	Fishing hook entering through skin, sequela
External Causes of Morbidity	Y36.A1XA	Low level blast overpressure in war operations, initial encounter
External Causes of Morbidity	Y36.A1XD	Low level blast overpressure in war operations, subsequent encounter
External Causes of Morbidity	Y36.A1XS	Low level blast overpressure in war operations, sequela
External Causes of Morbidity	Y36.A2XA	High level blast overpressure in war operations, initial encounter
External Causes of Morbidity	Y36.A2XD	High level blast overpressure in war operations, subsequent encounter
External Causes of Morbidity	Y36.A2XS	High level blast overpressure in war operations, sequela
External Causes of Morbidity	Y37.A1XA	Low level blast overpressure in military operations, initial encounter
External Causes of Morbidity	Y37.A1XD	Low level blast overpressure in military operations, subsequent encounter

New ICD-10 Codes for 2026

System	ICD-10 Code	Description
External Causes of Morbidity	Y37.A1XS	Low level blast overpressure in military operations, sequela
External Causes of Morbidity	Y37.A2XA	High level blast overpressure in military operations, initial encounter
External Causes of Morbidity	Y37.A2XD	High level blast overpressure in military operations, subsequent encounter
External Causes of Morbidity	Y37.A2XS	High level blast overpressure in military operations, sequela
External Causes of Morbidity	Y93.L1	Activity, splitting wood
External Causes of Morbidity	Y93.L9	Activity, other outdoor activity

Chapter 21: Factors Influencing Health Status and Contact with Health Services

Factors Influencing Health Status and Contact with Health Services	Z15.05	Genetic susceptibility to malignant neoplasm of fallopian tube(s)
Factors Influencing Health Status and Contact with Health Services	Z15.060	Genetic susceptibility to colorectal cancer
Factors Influencing Health Status and Contact with Health Services	Z15.068	Genetic susceptibility to other malignant neoplasm of digestive system
Factors Influencing Health Status and Contact with Health Services	Z15.07	Genetic susceptibility to malignant neoplasm of urinary tract
Factors Influencing Health Status and Contact with Health Services	Z15.3	Genetic susceptibility to kidney disease
Factors Influencing Health Status and Contact with Health Services	Z40.81	Encounter for prophylactic surgery for removal of ovary(s) for persons without known genetic/familial risk factors
Factors Influencing Health Status and Contact with Health Services	Z40.82	Encounter for prophylactic surgery for removal of fallopian tube(s) for persons without known genetic/familial risk factors
Factors Influencing Health Status and Contact with Health Services	Z40.89	Encounter for other prophylactic surgery
Factors Influencing Health Status and Contact with Health Services	Z59.861	Financial insecurity, difficulty paying for utilities
Factors Influencing Health Status and Contact with Health Services	Z59.868	Other specified financial insecurity
Factors Influencing Health Status and Contact with Health Services	Z59.869	Financial insecurity, unspecified
Factors Influencing Health Status and Contact with Health Services	Z77.31	Contact with and (suspected) exposure to Gulf War theater
Factors Influencing Health Status and Contact with Health Services	Z77.39	Contact with and (suspected) exposure to other war theater
Factors Influencing Health Status and Contact with Health Services	Z80.44	Family history of malignant neoplasm of fallopian tube(s)
Factors Influencing Health Status and Contact with Health Services	Z84.11	Family history of APOL1-mediated kidney disease [AMKD]
Factors Influencing Health Status and Contact with Health Services	Z84.19	Family history of other disorders of kidney and ureter
Factors Influencing Health Status and Contact with Health Services	Z84.A	Family history of exposure to diethylstilbesterol
Factors Influencing Health Status and Contact with Health Services	Z85.4A	Personal history of malignant neoplasm of fallopian tube(s)
Factors Influencing Health Status and Contact with Health Services	Z86.00A	Personal history of in-situ neoplasm of the fallopian tube(s)
Factors Influencing Health Status and Contact with Health Services	Z91.0110	Allergy to milk products, unspecified
Factors Influencing Health Status and Contact with Health Services	Z91.0111	Allergy to milk products with tolerance to baked milk
Factors Influencing Health Status and Contact with Health Services	Z91.0112	Allergy to milk products with reactivity to baked milk
Factors Influencing Health Status and Contact with Health Services	Z91.0120	Allergy to eggs, unspecified
Factors Influencing Health Status and Contact with Health Services	Z91.0121	Allergy to eggs with tolerance to baked egg
Factors Influencing Health Status and Contact with Health Services	Z91.0122	Allergy to eggs with reactivity to baked egg
Factors Influencing Health Status and Contact with Health Services	Z91.B	Personal risk factor of exposure to diethylstilbesterol

Revised ICD-10 Codes for 2026

System	ICD-10 Code	New Description	Old Description
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Chapter 12: Diseases of the Skin and Subcutaneous Tissue

Diseases of the Skin and Subcutaneous Tissue	L02.212	Cutaneous abscess of back [any part, except buttock and flank]	Cutaneous abscess of back [any part, except buttock]
Diseases of the Skin and Subcutaneous Tissue	L02.222	Furuncle of back [any part, except buttock and flank]	Furuncle of back [any part, except buttock]

Chapter 13: Diseases of the Musculoskeletal System and Connective Tissue

Diseases of the Musculoskeletal System and Connective Tissue	M21.159	Varus deformity, not elsewhere classified, unspecified hip	Varus deformity, not elsewhere classified, unspecified
Diseases of the Musculoskeletal System and Connective Tissue	M24.076	Loose body in unspecified toe joint(s)	Loose body in unspecified toe joints
Diseases of the Musculoskeletal System and Connective Tissue	M61.129	Myositis ossificans progressiva, unspecified upper arm	Myositis ossificans progressiva, unspecified arm

Chapter 16: Certain Conditions Originating in the Perinatal Period

Certain Conditions Originating in the Perinatal Period	P09.6	Abnormal findings on neonatal hearing loss	Abnormal findings on neonatal screening for neonatal hearing loss
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Chapter 17: Congenital Malformations, Deformations and

Congenital Malformations, Deformations and Chromosomal Abnormalities	Q75.001	Craniosynostosis, unspecified type , unilateral	Craniosynostosis unspecified, unilateral
Congenital Malformations, Deformations and Chromosomal Abnormalities	Q75.002	Craniosynostosis, unspecified type , bilateral	Craniosynostosis, unspecified, bilateral
Congenital Malformations, Deformations and Chromosomal Abnormalities	Q75.009	Craniosynostosis, unspecified	Craniosynostosis unspecified
Congenital Malformations, Deformations and Chromosomal Abnormalities	Q75.021	Coronal craniosynostosis, unilateral	Coronal craniosynostosis unilateral
Congenital Malformations, Deformations and Chromosomal Abnormalities	Q75.022	Coronal craniosynostosis, bilateral	Coronal craniosynostosis bilateral
Congenital Malformations, Deformations and Chromosomal Abnormalities	Q75.029	Coronal craniosynostosis, unspecified	Coronal craniosynostosis unspecified

Chapter 19: Injury, Poisoning and Certain Other Consequences of External Causes

Injury, Poisoning and Certain Other Consequences of External Causes	S62.90XA	Unspecified fracture of unspecified hand, initial encounter for closed fracture	Unspecified fracture of unspecified wrist and hand, initial encounter for closed fracture
Injury, Poisoning and Certain Other Consequences of External Causes	S62.90XB	Unspecified fracture of unspecified hand, initial encounter for open fracture	Unspecified fracture of unspecified wrist and hand, initial encounter for open fracture
Injury, Poisoning and Certain Other Consequences of External Causes	S62.90XD	Unspecified fracture of unspecified hand, subsequent encounter for fracture with routine healing	Unspecified fracture of unspecified wrist and hand, subsequent encounter for fracture with routine healing
Injury, Poisoning and Certain Other Consequences of External Causes	S62.90XG	Unspecified fracture of unspecified hand, subsequent encounter for fracture with delayed healing	Unspecified fracture of unspecified wrist and hand, subsequent encounter for fracture with delayed healing
Injury, Poisoning and Certain Other Consequences of External Causes	S62.90XK	Unspecified fracture of unspecified hand, subsequent encounter for fracture with nonunion	Unspecified fracture of unspecified wrist and hand, subsequent encounter for fracture with nonunion
Injury, Poisoning and Certain Other Consequences of External Causes	S62.90XP	Unspecified fracture of unspecified hand, subsequent encounter for fracture with malunion	Unspecified fracture of unspecified wrist and hand, subsequent encounter for fracture with malunion
Injury, Poisoning and Certain Other Consequences of External Causes	S62.90XS	Unspecified fracture of unspecified hand, sequela	Unspecified fracture of unspecified wrist and hand, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	S62.91XA	Unspecified fracture of right hand, initial encounter for closed fracture	Unspecified fracture of right wrist and hand, initial encounter for closed fracture
Injury, Poisoning and Certain Other Consequences of External Causes	S62.91XB	Unspecified fracture of right hand, initial encounter for open fracture	Unspecified fracture of right wrist and hand, initial encounter for open fracture
Injury, Poisoning and Certain Other Consequences of External Causes	S62.91XD	Unspecified fracture of right hand, subsequent encounter for fracture with routine healing	Unspecified fracture of right wrist and hand, subsequent encounter for fracture with routine healing
Injury, Poisoning and Certain Other Consequences of External Causes	S62.91XG	Unspecified fracture of right hand, subsequent encounter for fracture with delayed healing	Unspecified fracture of right wrist and hand, subsequent encounter for fracture with delayed healing
Injury, Poisoning and Certain Other Consequences of External Causes	S62.91XK	Unspecified fracture of right hand, subsequent encounter for fracture with nonunion	Unspecified fracture of right wrist and hand, subsequent encounter for fracture with nonunion

Revised ICD-10 Codes for 2026

System	ICD-10 Code	New Description	Old Description
Injury, Poisoning and Certain Other Consequences of External Causes	S62.91XP	Unspecified fracture of right hand, subsequent encounter for fracture with malunion	Unspecified fracture of right wrist and hand, subsequent encounter for fracture with malunion
Injury, Poisoning and Certain Other Consequences of External Causes	S62.91XS	Unspecified fracture of right hand, sequela	Unspecified fracture of right wrist and hand, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	S62.92XA	Unspecified fracture of left hand, initial encounter for closed fracture	Unspecified fracture of left wrist and hand, initial encounter for closed fracture
Injury, Poisoning and Certain Other Consequences of External Causes	S62.92XB	Unspecified fracture of left hand, initial encounter for open fracture	Unspecified fracture of left wrist and hand, initial encounter for open fracture
Injury, Poisoning and Certain Other Consequences of External Causes	S62.92XD	Unspecified fracture of left hand, subsequent encounter for fracture with routine healing	Unspecified fracture of left wrist and hand, subsequent encounter for fracture with routine healing
Injury, Poisoning and Certain Other Consequences of External Causes	S62.92XG	Unspecified fracture of left hand, subsequent encounter for fracture with delayed healing	Unspecified fracture of left wrist and hand, subsequent encounter for fracture with delayed healing
Injury, Poisoning and Certain Other Consequences of External Causes	S62.92XK	Unspecified fracture of left hand, subsequent encounter for fracture with nonunion	Unspecified fracture of left wrist and hand, subsequent encounter for fracture with non-union
Injury, Poisoning and Certain Other Consequences of External Causes	S62.92XP	Unspecified fracture of left hand, subsequent encounter for fracture with malunion	Unspecified fracture of left wrist and hand, subsequent encounter for fracture with malunion
Injury, Poisoning and Certain Other Consequences of External Causes	S62.92XS	Unspecified fracture of left hand, sequela	Unspecified fracture of left wrist and hand, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	S74.21XA	Injury of cutaneous sensory nerve at hip and thigh level, right leg, initial encounter	Injury of cutaneous sensory nerve at hip and high level, right leg, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S74.21XD	Injury of cutaneous sensory nerve at hip and thigh level, right leg, subsequent encounter	Injury of cutaneous sensory nerve at hip and high level, right leg, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	S74.21XS	Injury of cutaneous sensory nerve at hip and thigh level, right leg, sequela	Injury of cutaneous sensory nerve at hip and high level, right leg, sequela

Chapter 20: External Causes of Morbidity

External Causes of Morbidity	Y07.435	Stepbrother, perpetrator of maltreatment and neglect	Stepbrother, perpetrator or maltreatment and neglect
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Chapter 21: Factors Influencing Health Status and Contact with Health Services

Factors Influencing Health Status and Contact with Health Services	Z83.718	Family history of other colon polyps	Other Family history of other colon polyps
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Deleted ICD-10 Codes for 2026

System	ICD-10 Code	Description
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Chapter 1: Certain Parasitic and Infectious Diseases

Certain Parasitic and Infectious Diseases	B88.0	Other acariasis
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Chapter 3: Diseases of the Blood and Blood Forming Organs

Diseases of the Blood and Blood Forming Organs	D71	Functional disorders of polymorphonuclear neutrophils
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Chapter 4: Endocrine, Nutritional and Metabolic Diseases

Endocrine, Nutritional and Metabolic Diseases	E72.53	Primary hyperoxaluria
Endocrine, Nutritional and Metabolic Diseases	E78.01	Familial hypercholesterolemia
Endocrine, Nutritional and Metabolic Diseases	E88.1	Lipodystrophy, not elsewhere classified

Chapter 6: Diseases of the Nervous System

Diseases of the nervous system	G35	Multiple sclerosis
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Chapter 7: Diseases of the Eye and Adnexa

Diseases of the Eye and Adnexa	H01.8	Other specified inflammations of eyelid
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Chapter 17: Congenital Malformations, Deformations and Chromosomal Abnormalities

Congenital Malformations, Deformations and Chromosomal Abnormalities	Q89.8	Other specified congenital malformations
Congenital Malformations, Deformations and Chromosomal Abnormalities	Q99.8	Other specified chromosome abnormalities

Chapter 18: Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified

Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	R10.2	Pelvic and perineal pain
Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	R76.8	Other specified abnormal immunological findings in serum

Chapter 19: Injury, Poisoning and Certain Other Consequences of External Causes

Injury, Poisoning and Certain Other Consequences of External Causes	S30.1XXA	Contusion of abdominal wall, initial encounter
Injury, poisoning and certain other consequences of external causes	S30.1XXD	Contusion of abdominal wall, subsequent encounter
Injury, poisoning and certain other consequences of external causes	S30.1XXS	Contusion of abdominal wall, sequela
Injury, poisoning and certain other consequences of external causes	T78.07XA	Anaphylactic reaction due to milk and dairy products, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.07XD	Anaphylactic reaction due to milk and dairy products, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.07XS	Anaphylactic reaction due to milk and dairy products, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T78.08XA	Anaphylactic reaction due to eggs, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.08XD	Anaphylactic reaction due to eggs, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.08XS	Anaphylactic reaction due to eggs, sequela
Injury, Poisoning and Certain Other Consequences of External Causes	T78.1XXA	Other adverse food reactions, not elsewhere classified, initial encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.1XXD	Other adverse food reactions, not elsewhere classified, subsequent encounter
Injury, Poisoning and Certain Other Consequences of External Causes	T78.1XXS	Other adverse food reactions, not elsewhere classified, sequela

Chapter 21: Factors Influencing Health Status and Contact with Health Services

Factors Influencing Health Status and Contact with Health Services	Z40.8	Encounter for other prophylactic surgery
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Deleted ICD-10 Codes for 2026

System	ICD-10 Code	Description
Factors Influencing Health Status and Contact with Health Services	Z59.86	Financial insecurity
Factors Influencing Health Status and Contact with Health Services	Z84.1	Family history of disorders of kidney and ureter
Factors Influencing Health Status and Contact with Health Services	Z91.011	Allergy to milk products
Factors Influencing Health Status and Contact with Health Services	Z91.012	Allergy to eggs