CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 12683	**Date: June 13, 2024**
	Change Request 13622

SUBJECT: Update to the Internet Only Manual (IOM) Publication (Pub.) 100-04, Chapter 32, Section 150.3 for Coding Revisions to the National Coverage Determinations (NCDs)--October 2024 Change Request (CR)13596

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to make updates to chapter 32, section 150.3 of the Medicare Claims Processing Manual Pub. 100-04 to coincide with the NCD updates in CR13596 - International Classification of Diseases, 10th Revision (ICD-10) and Other Coding Revisions to National Coverage Determinations (NCDs) - October 2024.

EFFECTIVE DATE: January 1, 2020
Unless otherwise specified, the effective date is the date of service.
IMPLEMENTATION DATE: July 15, 2024

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)
R=REVISED, N=NEW, D=DELETED-*Only One Per Row.*

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
R	32/150/150.3/ICD Procedure Codes for Bariatric Surgery for Treatment of Co-Morbid Conditions Related to Morbid Obesity (A/MACs only)

III. FUNDING:
For Medicare Administrative Contractors (MACs):
The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS:

Business Requirements
Manual Instruction

Attachment - Business Requirements

Pub. 100-04	Transmittal: 12683	Date: June 13, 2024	Change Request: 13622

SUBJECT: Update to the Internet Only Manual (IOM) Publication (Pub.) 100-04, Chapter 32, Section 150.3 for Coding Revisions to the National Coverage Determinations (NCDs)--October 2024 Change Request (CR)13596

EFFECTIVE DATE: January 1, 2020
Unless otherwise specified, the effective date is the date of service.
IMPLEMENTATION DATE: July 15, 2024

I.   GENERAL INFORMATION

A.   Background: The purpose of this Change Request (CR) is to update Pub. 100-04, Chapter 32, section 150.3 for the billing requirements of the Medicare Claims Processing Manual. The revision listed below can be found in CR13596 - International Classification of Diseases, 10th Revision (ICD-10) and Other Coding Revisions to National Coverage Determinations (NCDs) - October 2024.

NCD 100.1 Bariatric Surgery for Treatment of Co-Morbid Conditions Related to Morbid Obesity: Add - ICD 10 procedure codes 0DB84ZZ, 0DB93ZZ, 0DBB3ZZ, 0D164ZB, and 0F194Z3 for endoscopic surgical approaches effective January 1, 2020.

B.   Policy: There are no policy changes.

II.   BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility									
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
13622.1	The Medicare contractors shall be aware of the manual updates in Pub 100-04, Chapter 32, Sections 150.3.	X								

III.   PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			D M E M A C	C E D I
		A	B	H H H		
	None					

IV.   SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A

"Should" denotes a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:

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

V. CONTACTS

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

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):
The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

ATTACHMENTS: 0

150.3 - ICD Procedure Codes for Bariatric Surgery for Treatment of Co-Morbid Conditions Related to Morbid Obesity (A/MACs only)
(Rev.12683 Issued: 06-13-24; Effective: 01-01-20; Implementation: 07-15-24)

Covered ICD Procedure Codes

For services on or after October 1, 2015, the following independent ICD-10 procedure codes are covered for bariatric surgery:

0D16479	Bypass Stomach to Duodenum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach
0D1647A	Bypass Stomach to Jejunum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach
0D1647B	Bypass Stomach to Ileum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach
0D1647L	Bypass Stomach to Transverse Colon with Autologous Tissue Substitute, Percutaneous Endoscopic Approach
0D164J9	Bypass Stomach to Duodenum with Synthetic Substitute, Percutaneous Endoscopic Approach
0D164JA	Bypass Stomach to Jejunum with Synthetic Substitute, Percutaneous Endoscopic Approach
0D164JB	Bypass Stomach to Ileum with Synthetic Substitute, Percutaneous Endoscopic Approach
0D164JL	Bypass Stomach to Transverse Colon with Synthetic Substitute, Percutaneous Endoscopic Approach
0D164K9	Bypass Stomach to Duodenum with Non-autologous Tissue Substitute, Percutaneous Endoscopic Approach
0D164KA	Bypass Stomach to Jejunum with Non-autologous Tissue Substitute, Percutaneous Endoscopic Approach
0D164KB	Bypass Stomach to Ileum with Non-autologous Tissue Substitute, Percutaneous Endoscopic Approach
0D164KL	Bypass Stomach to Transverse Colon with Non-autologous Tissue Substitute, Percutaneous Endoscopic Approach
0D164Z9	Bypass Stomach to Duodenum, Percutaneous Endoscopic Approach
0D164ZA	Bypass Stomach to Jejunum, Percutaneous Endoscopic Approach
0D164ZB	Bypass Stomach to Ileum, Percutaneous Endoscopic Approach

0D164ZL Bypass Stomach to Transverse Colon, Percutaneous Endoscopic Approach

0D16079 Bypass Stomach to Duodenum with Autologous Tissue Substitute, Open Approach

0D1607A Bypass Stomach to Jejunum with Autologous Tissue Substitute, Open Approach

0D1607B Bypass Stomach to Ileum with Autologous Tissue Substitute, Open Approach

0D1607L Bypass Stomach to Transverse Colon with Autologous Tissue Substitute, Open Approach

0D160J9 Bypass Stomach to Duodenum with Synthetic Substitute, Open Approach

0D160JA Bypass Stomach to Jejunum with Synthetic Substitute, Open Approach

0D160JB Bypass Stomach to Ileum with Synthetic Substitute, Open Approach

0D160JL Bypass Stomach to Transverse Colon with Synthetic Substitute, Open Approach

0D160K9 Bypass Stomach to Duodenum with Non-autologous Tissue Substitute, Open Approach

0D160KA Bypass Stomach to Jejunum with Non-autologous Tissue Substitute, Open Approach

0D160KB Bypass Stomach to Ileum with Non-autologous Tissue Substitute, Open Approach

0D160KL Bypass Stomach to Transverse Colon with Non-autologous Tissue Substitute, Open Approach

0D160Z9 Bypass Stomach to Duodenum, Open Approach

0D160ZA Bypass Stomach to Jejunum, Open Approach

0D160ZB Bypass Stomach to Ileum, Open Approach

0D160ZL Bypass Stomach to Transverse Colon, Open Approach

0D16879 Bypass Stomach to Duodenum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic

0D1687A Bypass Stomach to Jejunum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic

0D1687B Bypass Stomach to Ileum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic

0D1687L	Bypass Stomach to Transverse Colon with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic
0D168J9	Bypass Stomach to Duodenum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic
0D168JA	Bypass Stomach to Jejunum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic
0D168JB	Bypass Stomach to Ileum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic
0D168JL	Bypass Stomach to Transverse Colon with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic
0D168K9	Bypass Stomach to Duodenum with Non-autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic
0D168KA	Bypass Stomach to Jejunum with Non-autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic
0D168KB	Bypass Stomach to Ileum with Non-autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic
0D168KL	Bypass Stomach to Transverse Colon with Non-autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic
0D168Z9	Bypass Stomach to Duodenum, Via Natural or Artificial Opening Endoscopic
0D168ZA	Bypass Stomach to Jejunum, Via Natural or Artificial Opening Endoscopic
0D168ZB	Bypass Stomach to Ileum, Via Natural or Artificial Opening Endoscopic
0D168ZL	Bypass Stomach to Transverse Colon, Via Natural or Artificial Opening Endoscopic
0DV64CZ	Restriction of Stomach with Extraluminal Device, Percutaneous Endoscopic Approach

To describe either laparoscopic or open BPD with DS or GRDS, one code from each of the following three groups must be on the claim:

Group 1:
0DB60Z3	Excision of Stomach, Open Approach, Vertical
0DB60ZZ	Excision of Stomach, Open Approach
0DB63Z3	Excision of Stomach, Percutaneous Approach, Vertical
0DB63ZZ	Excision of Stomach, Percutaneous Approach

0DB67Z3	Excision of Stomach, Via Natural or Artificial Opening, Vertical
0DB67ZZ	Excision of Stomach, Via Natural or Artificial Opening
0DB68Z3	Excision of Stomach, Via Natural or Artificial Opening Endoscopic, Vertical

Group 2:
(Note: One code from A-C below is required for a correct equivalent)

0DB80ZZ	Excision of Small Intestine, Open Approach – A
0DB84ZZ	*Excision of Small Intestine, Perc Endo Approach – A (Effective 01-01-20)*
0DB90ZZ	Excision of Duodenum, Open Approach – A
0DB93ZZ	*Excision of Duodenum, Percutaneous Approach – A (Effective 01-01-20)*
0DBB0ZZ	Excision of Ileum, Open Approach – A
0DBB3ZZ	*Excision of Ileum, Percutaneous Approach – A (Effective 01-01-20)*
0D160ZB	Bypass Stomach to Ileum, Open Approach – B
0D164ZB	*Bypass Stomach to Ileum, Percutaneous Endoscopic Approach – B (Effective 01-01-20)*
0F190Z3	Bypass Common Bile Duct to Duodenum, Open Approach – C
0F194Z3	*Bypass Common Bile Duct to Duodenum, Perc Endo Approach – C (Effective 01-01-20)*

Group 3:

0D19079	Bypass Duodenum to Duodenum with Autologous Tissue Substitute, Open Approach
0D1907A	Bypass Duodenum to Jejunum with Autologous Tissue Substitute, Open Approach
0D1907B	Bypass Duodenum to Ileum with Autologous Tissue Substitute, Open Approach
0D190J9	Bypass Duodenum to Duodenum with Synthetic Substitute, Open Approach
0D190JA	Bypass Duodenum to Jejunum with Synthetic Substitute, Open Approach
0D190JB	Bypass Duodenum to Ileum with Synthetic Substitute, Open Approach
0D190K9	Bypass Duodenum to Duodenum with Non-autologous Tissue Substitute, Open Approach
0D190KA	Bypass Duodenum to Jejunum with Non-autologous Tissue Substitute, Open Approach
0D190KB	Bypass Duodenum to Ileum with Non-autologous Tissue Substitute, Open Approach
0D190Z9	Bypass Duodenum to Duodenum, Open Approach
0D190ZA	Bypass Duodenum to Jejunum, Open Approach
0D190ZB	Bypass Duodenum to Ileum, Open Approach
0D19479	Bypass Duodenum to Duodenum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach

0D1947A   Bypass Duodenum to Jejunum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach

0D1947B   Bypass Duodenum to Ileum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach

0D194J9   Bypass Duodenum to Duodenum with Synthetic Substitute, Percutaneous Endoscopic Approach

0D194JA   Bypass Duodenum to Jejunum with Synthetic Substitute, Percutaneous Endoscopic Approach

0D194JB   Bypass Duodenum to Ileum with Synthetic Substitute, Percutaneous Endoscopic Approach

0D194K9   Bypass Duodenum to Duodenum with Non-autologous Tissue Substitute, Percutaneous Endoscopic Approach

    0D194KA   Bypass Duodenum to Jejunum with Non-autologous Tissue Substitute, Percutaneous Endoscopic Approach

    0D194KB   Bypass Duodenum to Ileum with Non-autologous Tissue Substitute, Percutaneous Endoscopic Approach

    0D194Z9   Bypass Duodenum to Duodenum, Percutaneous Endoscopic Approach

    0D194ZA   Bypass Duodenum to Jejunum, Percutaneous Endoscopic Approach

    0D194ZB   Bypass Duodenum to Ileum, Percutaneous Endoscopic Approach

    0D19879   Bypass Duodenum to Duodenum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic

    0D1987A   Bypass Duodenum to Jejunum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic

    0D1987B   Bypass Duodenum to Ileum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic

    0D198J9   Bypass Duodenum to Duodenum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic

    0D198JA   Bypass Duodenum to Jejunum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic

    0D198JB   Bypass Duodenum to Ileum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic

    0D198K9   Bypass Duodenum to Duodenum with Non-autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic

    0D198KA   Bypass Duodenum to Jejunum with Non-autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic

0D198KB   Bypass Duodenum to Ileum with Non-autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic

0D198Z9   Bypass Duodenum to Duodenum, Via Natural or Artificial Opening Endoscopic

0D198ZA   Bypass Duodenum to Jejunum, Via Natural or Artificial Opening Endoscopic

0D198ZB   Bypass Duodenum to Ileum, Via Natural or Artificial Opening Endoscopic

0D1A07A   Bypass Jejunum to Jejunum with Autologous Tissue Substitute, Open Approach

0D1A07B   Bypass Jejunum to Ileum with Autologous Tissue Substitute, Open Approach

0D1A0JA   Bypass Jejunum to Jejunum with Synthetic Substitute, Open Approach

0D1A0JB   Bypass Jejunum to Ileum with Synthetic Substitute, Open Approach

0D1A0KA   Bypass Jejunum to Jejunum with Non-autologous Tissue Substitute, Open Approach

0D1A0KB   Bypass Jejunum to Ileum with Non-autologous Tissue Substitute, Open Approach

0D1A0ZA   Bypass Jejunum to Jejunum, Open Approach

0D1A0ZB   Bypass Jejunum to Ileum, Open Approach

0D1A47A   Bypass Jejunum to Jejunum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach

0D1A47B   Bypass Jejunum to Ileum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach

0D1A4JA   Bypass Jejunum to Jejunum with Synthetic Substitute, Percutaneous Endoscopic Approach

0D1A4JB   Bypass Jejunum to Ileum with Synthetic Substitute, Percutaneous Endoscopic Approach

0D1A4KA   Bypass Jejunum to Jejunum with Non-autologous Tissue Substitute, Percutaneous Endoscopic Approach

0D1A4KB   Bypass Jejunum to Ileum with Non-autologous Tissue Substitute, Percutaneous Endoscopic Approach

0D1A4ZA   Bypass Jejunum to Jejunum, Percutaneous Endoscopic Approach

0D1A4ZB   Bypass Jejunum to Ileum, Percutaneous Endoscopic Approach

0D1A87A   Bypass Jejunum to Jejunum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic

0D1A87B	Bypass Jejunum to Ileum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic
0D1A8JA	Bypass Jejunum to Jejunum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic
0D1A8JB	Bypass Jejunum to Ileum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic
0D1A8KA	Bypass Jejunum to Jejunum with Non-autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic
0D1A8KB	Bypass Jejunum to Ileum with Non-autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic
0D1A8ZA	Bypass Jejunum to Jejunum, Via Natural or Artificial Opening Endoscopic
0D1A8ZB	Bypass Jejunum to Ileum, Via Natural or Artificial Opening Endoscopic
0D1A8ZH	Bypass Jejunum to Cecum, Via Natural or Artificial Opening Endoscopic
0D1B07B	Bypass Ileum to Ileum with Autologous Tissue Substitute, Open Approach
0D1B0JB	Bypass Ileum to Ileum with Synthetic Substitute, Open Approach
0D1B0KB	Bypass Ileum to Ileum with Non-autologous Tissue Substitute, Open Approach
0D1B0ZB	Bypass Ileum to Ileum, Open Approach
0D1B47B	Bypass Ileum to Ileum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach
0D1B4JB	Bypass Ileum to Ileum with Synthetic Substitute, Percutaneous Endoscopic Approach
0D1B4KB	Bypass Ileum to Ileum with Non-autologous Tissue Substitute, Percutaneous Endoscopic Approach
0D1B4ZB	Bypass Ileum to Ileum, Percutaneous Endoscopic Approach
0D1B87B	Bypass Ileum to Ileum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic
0D1B8JB	Bypass Ileum to Ileum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic

0D1B8KB   Bypass Ileum to Ileum with Non-autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic

0D1B8ZB   Bypass Ileum to Ileum, Via Natural or Artificial Opening Endoscopic

0D1B8ZH   Bypass Ileum to Cecum, Via Natural or Artificial Opening Endoscopic

NOTE: There is no distinction between open and laparoscopic BPD with DS or GRDS for the inpatient setting. For either approach, one code from each of the above three groups must appear on the claim to be covered.

Effective October 1, 2015, the following ICD-10 procedure code is covered for bariatric surgery at contractor discretion:

0DB64Z3 Excision of stomach, percutaneous endoscopic approach, vertical.