

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 12822	Date: September 5, 2024
	Change Request 13738

SUBJECT: Update to the Internet Only Manual (IOM) Publication (Pub.) 100-04, Chapter 18 Section 170.1 and Chapter 32 Section 190.2 for Coding Revisions to the National Coverage Determinations (NCDs)--April 2024 Change Request (CR) 13390

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to make updates to chapter 18, section 170.1, and chapter 32 section 190.2 of the Medicare Claims Processing Manual Pub. 100-04 to coincide with the NCD updates in CR 13390, "International Classification of Diseases, 10th Revision (ICD-10) and Other Coding Revisions to National Coverage Determinations (NCDs)-April 2024".

EFFECTIVE DATE: October 1, 2023

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

IMPLEMENTATION DATE: November 7, 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	18/170/170.1/Healthcare Common Procedure Coding System (HCPCS) Codes for Screening for STIs and HIBC to Prevent STIs
R	32/190/190.2/Healthcare Common Procedural Coding System (HCPCS), Applicable Diagnosis Codes and Procedure Code

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: 12822	Date: September 5, 2024	Change Request: 13738
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II. GENERAL INFORMATION

A. Background: The purpose of this Change Request (CR) is to update Pub. 100-04, chapter 18, section 170.1, and chapter 32 section 190.2 for the billing requirements of the Medicare Claims Processing Manual. The revisions listed below can be found in CR13390, International Classification of Diseases, 10th Revision (ICD-10) and Other Coding Revisions to National Coverage Determinations (NCDs)-April 2024.

NCD 210.10 Screening for Sexually Transmitted Infections (STIs) and High-Intensity Behavioral Counseling (HIBC) to Prevent STIs: Add CPT 0402U (used for combined chlamydia and gonorrhea testing), effective October 1, 2023. (100-04 Chapter 18, Section 170.1)

NCD 110.4 Extracorporeal Photopheresis: Add ICD-10 code J44.81, effective October 1, 2023. (Chapter 32, Section 190.2)

B. Policy: This CR does not involve any changes to policy.

III. 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	
13738.1	The Medicare contractors shall be aware of the manual updates in Pub 100-04, Chapter 18, Section 170.1.	X	X							
13738.2	The Medicare contractors shall be aware of the manual updates in Pub 100-04, Chapter 32,	X	X							

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
	Section 190.2.									

IV. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			DME MAC	CEDI
		A	B	HHH		
	None					

V. SUPPORTING INFORMATION

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

"Should" denotes a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:

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

VI. CONTACTS

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

VII. FUNDING

Section A: For Medicare Administrative Contractors (MACs):

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ATTACHMENTS: 0

170.1 - Healthcare Common Procedure Coding System (HCPCS) Codes for Screening for STIs and HIBC to Prevent STIs

(Rev.12822, Issued:09-05-24, Effective:10-01-23, Implementation: 11-07-24)

Effective for claims with dates of service on and after November 8, 2011, the claims processing instructions for payment of screening tests for STI will apply to the following HCPCS/CPT codes:

- Chlamydia:
86631, 86632, 87110, 87270, 87320, 87490, 87491, 87810, 87800,
0353U - effective 10/01/22 (used for combined chlamydia and gonorrhea testing)
0402U – effective 10/01/23 (used for combined chlamydia and gonorrhea testing)
- Gonorrhea:
87590, 87591, 87850, 87800,
0353U - effective 10/01/22 (used for combined chlamydia and gonorrhea testing)
0402U – effective 10/01/23 (used for combined chlamydia and gonorrhea testing)
- Syphilis: 86592, 86593, 86780
 - Hepatitis B: (hepatitis B surface antigen): 87340, 87341

Effective for claims with dates of service on and after November 8, 2011, implemented with the January 2, 2012, IOCE, the following HCPCS code is to be billed for HIBC to prevent STIs:

- G0445 - high-intensity behavioral counseling to prevent sexually transmitted infections, face-to-face, individual, includes education, skills training, and guidance on how to change sexual behavior, performed semi-annually, 30 minutes.

190.2 – Healthcare Common Procedural Coding System (HCPCS), Applicable Diagnosis Codes and Procedure Code

(Rev.12822; Issued:09-05-024; Effective:10-01-23 Implementation:11-07-24)

The following HCPCS procedure code is used for billing extracorporeal photopheresis:

- 36522 - Photopheresis, extracorporeal

Effective for claims with dates of service on or after Oct 1, 2015, the following are the applicable ICD-10-CM procedure codes for the new expanded coverage:

- 6A650ZZ Phototherapy, Circulatory, Single
- 6A651ZZ Phototherapy, Circulatory, Multiple

NOTE: Contractors shall edit for an appropriate oncological and autoimmune disorder diagnosis for payment of extracorporeal photopheresis according to the NCD.

Effective for claims with dates of service on or after Oct 1, 2015, in addition to HCPCS 36522, the following ICD-10-CM codes are applicable for extracorporeal photopheresis for the treatment of BOS following lung allograft transplantation only when extracorporeal photopheresis is provided under a clinical research study as outlined in above sections 190 and 190.2 Healthcare Common Procedural Coding System (HCPCS) codes, and applicable diagnosis codes as below::

A reference listing of ICD-10-CM coding and descriptions is listed below:

CUTANEOUS T-CELL LYMPHOMA

C84.01	Mycosis fungoides, lymph nodes of head, face, and neck
C84.02	Mycosis fungoides, intrathoracic lymph nodes
C84.03	Mycosis fungoides, intra-abdominal lymph nodes
C84.04	Mycosis fungoides, lymph nodes of axilla and upper limb
C84.05	Mycosis fungoides, lymph nodes of inguinal region and lower limb
C84.06	Mycosis fungoides, intrapelvic lymph nodes
C84.07	Mycosis fungoides, spleen
C84.08	Mycosis fungoides, lymph nodes of multiple sites
C84.09	Mycosis fungoides, extranodal and solid organ sites
C84.11	Sézary disease, lymph nodes of head, face, and neck
C84.12	Sézary disease, intrathoracic lymph nodes
C84.13	Sézary disease, intra-abdominal lymph nodes
C84.14	Sézary disease, lymph nodes of axilla and upper limb

- C84.15 Sézary disease, lymph nodes of inguinal region and lower limb
- C84.16 Sézary disease, intrapelvic lymph nodes
- C84.17 Sézary disease, spleen
- C84.18 Sézary disease, lymph nodes of multiple sites
- C84.19 Sezary disease, extranodal/solid organ sites
- C84.A0 Cutaneous T-cell lymphoma, unspecified, unspecified site
- C84.A1 Cutaneous T-cell lymphoma, unspecified lymph nodes of head, face, and neck
- C84.A2 Cutaneous T-cell lymphoma, unspecified, intrathoracic lymph nodes
- C84.A3 Cutaneous T-cell lymphoma, unspecified, intra-abdominal lymph nodes
- C84.A4 Cutaneous T-cell lymphoma, unspecified, lymph nodes of axilla and upper limb
- C84.A5 Cutaneous T-cell lymphoma, unspecified, lymph nodes of inguinal region and lower limb
- C84.A6 Cutaneous T-cell lymphoma, unspecified, intrapelvic lymph nodes
- C84.A7 Cutaneous T-cell lymphoma, unspecified, spleen
- C84.A8 Cutaneous T-cell lymphoma, unspecified, lymph nodes of multiple sites
- C84.A9 Cutaneous T-cell lymphoma, unspecified, extranodal and solid organ sites

ACUTE CARDIAC ALLOGRAFT REJECTION/GRAFT-VERSUS-HOST-DISEASE

- D89.811 Chronic graft-versus-host disease
- D89.812 Acute on chronic graft-versus-host disease
- D89.813 Graft-versus-host disease, unspecified
- T86.01 Bone marrow transplant rejection
- T86.02 Bone marrow transplant failure
- T86.03 Bone marrow transplant infection
- T86.21 Heart transplant rejection
- T86.22 Heart transplant failure
- T86.23 Heart transplant infection
- T86.290 Cardiac allograft vasculopathy
- T86.31 Heart-lung transplant rejection
- T86.32 Heart-lung transplant failure
- T86.33 Heart-lung transplant infection
- T86.5 Complications of stem cell transplant
- Z94.3 Heart and lungs transplant status
- Z94.81 Bone marrow transplant status

BOS (CED/TRIAL ONLY)

- J42 Unspecified chronic bronchitis
- J44.0 Chronic obstructive pulmonary disease with (acute) lower respiratory infection
- J44.1 Chronic obstructive pulmonary disease with (acute) exacerbation
- J44.81 Bronchiolitis obliterans and bronchiolitis obliterans syndrome - Effective 10/1/23*
- J44.9 Chronic obstructive pulmonary disease, unspecified
- T86.810 Lung transplant rejection
- T86.811 Lung transplant failure
- T86.812 Lung transplant infection

T86.818 Other complications of lung transplant
T86.819 Unspecified complication of lung transplant
Z94.2 Lung transplant status
Z00.6 Encounter for examination for normal comparison and control in clinical research program