New HCPC Codes effective 7/1/26

CPT/ HCPC Code	Code Description	Effective Date	Coverage Classification	Prior Auth Requirements
J0528	Injection, fosfomycin disodium, 20 mg	07/01/26	DRUG/OFFICE ADMIN	AUTH
J1289	Injection, narsoplimab-wuug, 1 mg	07/01/26	DRUG/OFFICE ADMIN	AUTH
J1577	Injection, immune globulin (qivigy), 100 mg	07/01/26	DRUG/OFFICE ADMIN	AUTH
J2361	Injection, depemokimab-ulaa, 1 mg	07/01/26	DRUG/OFFICE ADMIN	AUTH
J2374	Apraclonidine hydrochloride ophthalmic, 1% solution, 0.1 ml	07/01/26	DRUG/OFFICE ADMIN	NO AUTH
J2789	Riboflavin 5'-phosphate, ophthalmic solution (epioxahd/epioxa), up to 2 ml	07/01/26	DRUG/OFFICE ADMIN	NO AUTH
J3386	Injection, etuvetidigene autotemcel, per treatment	07/01/26	DRUG/OFFICE ADMIN	AUTH
J3405	Injection, etuvetidigene autotemcel, per treatment	07/01/26	DRUG/OFFICE ADMIN	AUTH
J7176	Injection, human fibrinogen - chmt (fesilty), 1 mg	07/01/26	DRUG/OFFICE ADMIN	AUTH
J9053	Injection, belantamab mafodotin-blmf, 0.1 mg	07/01/26	DRUG/OFFICE ADMIN	AUTH
J9062	Injection, amivantamab 5 mg and hyaluronidase-lpuj	07/01/26	DRUG/OFFICE ADMIN	AUTH
J9232	Injection, docetaxel (hospira), not therapeutically equivalent to j9171, 1 mg	07/01/26	DRUG/OFFICE ADMIN	AUTH

M0231	Intravenous infusion, tocilizumabbavi, for hospitalized adult patients with covid-19 who are receiving systemic corticosteroids and require supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation only, includes infusion and post administration monitoring, first dose	07/01/26	DRUG/OFFICE ADMIN	AUTH
M0232	Intravenous infusion, tocilizumabbavi, for hospitalized adult patients with covid-19 who are receiving systemic corticosteroids and require supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation only, includes infusion and post administration monitoring, second dose	07/01/26	DRUG/OFFICE ADMIN	AUTH
Q0234	Injection, tocilizumab-bavi, for hospitalized adult patients with covid-19 who are receiving systemic corticosteroids and require supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation only, 1 mg	07/01/26	DRUG/OFFICE ADMIN	AUTH
Q5164	Injection, ustekinumab-srlf (imuldosa), biosimilar, 1 mg	07/01/26	DRUG/OFFICE ADMIN	AUTH
Q5165	Injection, tocilizumab-anoh (avtozma), biosimilar, 1 mg	07/01/26	DRUG/OFFICE ADMIN	AUTH

Q5166	Injection, denosumab-desu (osvyrti/jubereq), biosimilar, 1 mg	07/01/26	DRUG/OFFICE ADMIN	AUTH
Q5167	Injection, denosumab-qbde (enoby/xtrenbo), biosimilar, 1 mg	07/01/26	DRUG/OFFICE ADMIN	AUTH
Q5168	Injection, ranibizumab-leyk (nufymco), biosimilar, 0.1 mg	07/01/26	DRUG/OFFICE ADMIN	AUTH
Q5169	Injection, pegfilgrastim-unne (armlupeg), biosimilar, 0.5 mg	07/01/26	DRUG/OFFICE ADMIN	AUTH
Q5170	Injection, aflibercept-boav (eydenzelt), biosimilar, 1 mg	07/01/26	DRUG/OFFICE ADMIN	AUTH
Q5171	Injection, denosumab-mobz (boncresa), biosimilar, 1 mg	07/01/26	DRUG/OFFICE ADMIN	AUTH
A9574	Injection, ferumoxytol, 1 mg	07/01/26	DRUG/OFFICE ADMIN	NO AUTH
C9310	Injection, leucovorin calcium (avyxa), 1 mg	07/01/26	DRUG/OFFICE ADMIN	NO AUTH
C1609	Vertebral device, motion-preserving, with screw fixation	07/01/26	NON-COVERED	NO AUTH
C8014	Cystourethroscopy, with ureteroscopy and/or pyeloscopy, with lithotripsy, including use of a suction enabled ureteral access sheath, with irrigation (if performed)	07/01/26	NON-COVERED	NO AUTH
G0574	Management of new patient with dementia residing in an eligible residential care community, for use only in a medicare-approved cmmi model (services must be furnished within a patient's eligible residential care community, including assisted living facilities, board and care homes, or other qualifying residential settings where dementia care services are provided)	07/01/26	NON-REIMBURSABLE	NO AUTH

G0575	Management of established patient with dementia residing in an eligible residential care community, for use only in a medicare-approved cmmi model (services must be furnished within a patient's eligible residential care community, including assisted living facilities, board and care homes, or other qualifying residential settings where dementia care services are provided)	07/01/26	NON-REIMBURSABLE	NO AUTH
G0669	Outcome-aligned payment (oap) for technology-enabled chronic care management of early cardio-kidney-metabolic (eckm) conditions (hypertension, or two or more of: dyslipidemia, obesity/overweight with central obesity marker, prediabetes); initial 12-month period; per month	07/01/26	NON-REIMBURSABLE	NO AUTH
G0670	Outcome-aligned payment (oap) for technology-enabled chronic care management of early cardio-kidney-metabolic (eckm) conditions (hypertension, or two or more of: dyslipidemia, obesity/overweight with central obesity marker, prediabetes); follow-on 12-month period; per month	07/01/26	NON-REIMBURSABLE	NO AUTH

G0671	Outcome-aligned payment (oap) for technology-enabled chronic care management of cardio-kidney-metabolic (ckm) conditions (one or more of: diabetes mellitus, chronic kidney disease stage 3a or 3b, atherosclerotic cardiovascular disease); initial 12-month period; per month	07/01/26	NON-REIMBURSABLE	NO AUTH
G0672	Outcome-aligned payment (oap) for technology-enabled chronic care management of cardio-kidney-metabolic (ckm) conditions (one or more of: diabetes mellitus, chronic kidney disease stage 3a or 3b, atherosclerotic cardiovascular disease); follow-on 12-month period; per month	07/01/26	NON-REIMBURSABLE	NO AUTH
G0673	Outcome-aligned payment (oap) for technology-enabled chronic care management of musculoskeletal (msk) conditions (chronic musculoskeletal pain); initial 12-month treatment period; per month	07/01/26	NON-REIMBURSABLE	NO AUTH
G0674	Outcome-aligned payment (oap) for technology-enabled chronic care management of behavioral health (bh) conditions (one or more of: depression, anxiety); initial 12-month period; per month	07/01/26	NON-REIMBURSABLE	NO AUTH

G0675	Outcome-aligned payment (oap) for technology-enabled chronic care management of behavioral health (bh) conditions (one or more of: depression, anxiety); follow-on 12-month period; per month	07/01/26	NON-REIMBURSABLE	NO AUTH
G0676	Standard co-management service payment for documented review of clinical updates from access participant managing cardio-kidney-metabolic conditions (early cardio-kidney-metabolic [eckm] or cardio-kidney-metabolic [ckm] track); per review	07/01/26	NON-REIMBURSABLE	NO AUTH
G0677	Standard co-management service payment for documented review of clinical updates from access participant managing musculoskeletal (msk) conditions; per review	07/01/26	NON-REIMBURSABLE	NO AUTH
G0678	Standard co-management service payment for documented review of clinical updates from access participant managing behavioral health (bh) conditions (depression, anxiety); per review	07/01/26	NON-REIMBURSABLE	NO AUTH