CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 13292	Date: July 21, 2025
	Change Request 14153

SUBJECT: Changes to the Laboratory National Coverage Determination (NCD) Edit Software for October 2025

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to announce the changes that will be incurred in the October 2025 quarterly release of the edit module for clinical diagnostic laboratory services. This Recurring Update Notification applies to Chapter 16, Section 120.2, Publication 100-04.

EFFECTIVE DATE: October 1, 2025

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

IMPLEMENTATION DATE: October 6, 2025

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
N/A	N/A

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:

Recurring Update Notification

Attachment - Recurring Update Notification

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I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to announce the changes that will be incurred in the October 2025 quarterly release of the edit module for clinical diagnostic laboratory services. This Recurring Update Notification applies to Chapter 16, Section 120.2, Publication 100-04.

II. GENERAL INFORMATION

- **A. Background:** The purpose of this CR is to announce the changes that will be included in the October 2025 quarterly release of the edit module for clinical diagnostic laboratory services. The NCDs for clinical diagnostic laboratory services were developed by the laboratory negotiated rulemaking committee, and the final rule was published on November 23, 2001. Nationally uniform software was developed and incorporated in the Medicare shared systems so that laboratory claims subject to one of the 23 NCDs (Publication 100-03, Sections 190.12 190.34) were processed uniformly throughout the nation, effective April 1, 2003.
- **B.** Policy: In accordance with Chapter 16, §120.2, Publication 100-04, the laboratory edit module is updated quarterly as necessary to reflect ministerial coding updates and substantive changes to the NCDs developed through the NCD process. The changes are a result of coding analysis decisions developed under the procedures for maintenance of codes in the negotiated NCDs and biannual updates of the International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) codes. This instruction communicates requirements to Shared System Maintainers (SSMs) and contractors, notifying them of changes to the laboratory edit module to update it for changes in laboratory NCD code lists for January 2025.

III. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility									
		A	A/B MAC		DME	Share	d-Syster	tainers	Other		
		A	В	ННН		FISS	MCS	VMS	CWF		
					MAC						
14153.1	The module developer									Inclined	
	shall delete ICD-10-CM									Advanced	
	code R102 effective									Analytics	
	September 30, 2025,									-	
	from the list of ICD-10-										
	CM codes that are										
	covered by Medicare for										
	the Urine Culture,										

Number	Requirement	Re								
		A	/B]	MAC	DME	Share	d-Syste	m Main	tainers	Other
		A	В	ННН	MAC	FISS	MCS	VMS	CWF	
	Bacterial (190.12) NCD.									
14153.1.1	The module developer shall add ICD-10-CM codes R1020, R1021, R1022, R1023, and R1024 effective October 1, 2025, to the list of ICD-10-CM codes that are covered by Medicare for the Urine Culture, Bacterial (190.12) NCD.									Inclined Advanced Analytics
14153.1.2	The module developer shall delete ICD-10-CM codes Z408, Z5986 and Z841 effective September 30, 2025, from the list of ICD-10-CM codes that are denied by Medicare for the Urine Culture, Bacterial (190.12) NCD.									Inclined Advanced Analytics
14153.1.3	The module developer shall add ICD-10-CM codes Z4081, Z4082, Z4089, Z59861, Z59868, Z59869, Z841 and Z8419 effective October 1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the Urine Culture, Bacterial (190.12) NCD.									Inclined Advanced Analytics
14153.2	The module developer shall add ICD-10-CM codes Z4081, Z4082, Z4089, Z59861, Z59868, Z59869, Z8411 and Z8419 effective October 1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the Human Immunodeficiency Virus (HIV) Testing (Prognosis Including Monitoring) (190.13)									Inclined Advanced Analytics

Number	Requirement	Responsibility								
		A	/B I	MAC	DME	Share	tainers	Other		
		A	В	ННН	MAC	FISS	MCS	VMS	CWF	
	NCD.									
14153.2.1	The module developer shall delete ICD-10-CM codes Z408, Z5986 and Z841 effective September 30, 2025, from the list of ICD-10-CM codes that are denied by Medicare for the HIV Testing (Prognosis Including Monitoring) (190.13) NCD.									Inclined Advanced Analytics
14153.3	The module developer shall add ICD-10-CM codes E8810, E8811, E8812, E8813, E8814 and E8819 effective October 1, 2025, to the list of ICD-10-CM codes that are covered by Medicare for the HIV Testing (Diagnosis) (190.14) NCD.									Inclined Advanced Analytics
14153.3.1	The module developer shall delete ICD-10-CM code E881 effective September 30, 2025, from the list of ICD-10-CM codes that are covered by Medicare for the HIV Testing (Diagnosis) (190.14) NCD.									Inclined Advanced Analytics
14153.3.2	The module developer shall delete ICD-10-CM codes Z408, Z5986, and Z841 effective September 30, 2025, from the list of ICD-10-CM codes that are denied by Medicare for the HIV Testing (Diagnosis) (190.14) NCD.									Inclined Advanced Analytics

Number	Requirement	Re								
		Α	/B I	MAC	DME	Share		m Main	tainers	Other
		A	В	ННН	MAC	FISS	MCS	VMS	CWF	
14153.3.3	The module developer shall add ICD-10-CM codes Z4081, Z4082, Z4089, Z59861, Z59868, Z59869, Z8411 and Z8419 effective October 1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the HIV Testing (Diagnosis) (190.14) NCD.									Inclined Advanced Analytics
14153.4	The module developer shall delete ICD-10-CM codes H018, S301XXS, T7807XS, T7808XS and T781XXS effective September 30, 2025, from the list of ICD-10-CM codes that are not medically necessary for the Blood Counts (190.15) NCD.									Inclined Advanced Analytics
14153.4.1	The module developer shall add ICD-10-CM codes H0181, H0182, H0183, H0184, H0185, H0186, H0189, H018A and H018B effective October 1, 2025, to the list of ICD-10-CM codes that are not medically necessary for the Blood Counts (190.15) NCD.									Inclined Advanced Analytics
14153.4.2	The module developer shall delete ICD-10-CM codes Z408, Z5986 and Z841 effective September 30, 2025, from the list of ICD-10-CM codes that are denied by Medicare for the Blood Counts (190.15) NCD.									Inclined Advanced Analytics
14153.4.3	The module developer shall add ICD-10-CM codes Z4081, Z4082,									Inclined Advanced Analytics

Number	Requirement	Responsibility								
1		Α	/B I	MAC	DME	Share	d-Syste	m Main	tainers	Other
		A	В	ННН	MAC	FISS	MCS	VMS	CWF	
	Z4089, Z59861, Z59868, Z59869, Z8411 and Z8419 effective October 1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the Blood Counts (190.15) NCD.									
14153.5	The module developer shall delete ICD-10-CM codes R102 and S301XXA effective September 30, 2025, from the list of ICD-10-CM codes that are covered by Medicare for the Partial Thromboplastin Time (PTT) (190.16) NCD.									Inclined Advanced Analytics
14153.5.1	The module developer shall add ICD-10-CM codes R1020, R1021, R1022, R1023 and R1024 effective October 1, 2025, to the list of ICD-10-CM codes that are covered by Medicare for the PTT (190.16) NCD.									Inclined Advanced Analytics
14153.5.2	The module developer shall delete ICD-10-CM codes Z408, Z5986 and Z841 effective September 30, 2025, from the list of ICD-10-CM codes that are denied by Medicare for the PTT (190.16) NCD.									Inclined Advanced Analytics
14153.5.3	The module developer shall add ICD-10-CM codes Z4081, Z4082, Z4089, Z59861, Z59868, Z59869, Z8411 and Z8419 provided in the link effective September 30, 2025, from the list of ICD-10-CM codes that									Inclined Advanced Analytics

Number	Requirement	Re								
		Α	ı	MAC	DME		d-Syste			Other
		Α	В	ННН	MAC	FISS	MCS	VMS	CWF	
	are denied by Medicare for the PTT (190.16) NCD.				TVII IC					
14153.6	The module developer shall delete ICD-10-CM codes R102 and S301XXA effective September 30, 2025, from the list of ICD-10-CM codes that are covered by Medicare for the Prothrombin Time (PT) (190.17) NCD.									Inclined Advanced Analytics
14153.6.1	The module developer shall add ICD-10-CM codes R1020, R1021, R1022, R1023 and R1024 effective October 1, 2025, to the list of ICD-10-CM codes that are covered by Medicare for the PT (190.17) NCD.									Inclined Advanced Analytics
14153.6.2	The module developer shall delete ICD-10-CM codes Z408, Z5986 and Z841 effective September 30, 2025, from the list of ICD-10-CM codes that are denied by Medicare for the PT (190.17) NCD.									Inclined Advanced Analytics
14153.6.3	The module developer shall add ICD-10-CM codes Z4081, Z4082, Z4089, Z59861, Z59868, Z59869, Z8411 and Z8419 effective October 1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the PT (190.17) NCD.									Inclined Advanced Analytics
14153.7	The module developer shall delete ICD-10-CM codes Z408, Z5986 and									Inclined Advanced Analytics

Number	Requirement	Re								
		A	/B]	MAC	DME	Share	1	m Main	tainers	Other
		A	В	ННН	MAC	FISS	MCS	VMS	CWF	
	Z841, effective September 30, 2025, from the list of ICD-10- CM codes that are denied by Medicare for the Serum Iron Studies (190.18) NCD.									
14153.7.1	The module developer shall add ICD-10-CM codes Z4081, Z4082, Z4089, Z59861, Z59868, Z59869, Z8411 and Z8419 effective October 1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the Serum Iron Studies (190.18) NCD.									Inclined Advanced Analytics
14153.8	The module developer shall delete ICD-10-CM codes Z408, Z5986 and Z841 effective September 30, 2025, from the list of ICD-10-CM codes that are denied by Medicare for the Collagen Crosslinks, Any Method (190.19) NCD.									Inclined Advanced Analytics
14153.8.1	The module developer shall add ICD-10-CM codes Z4081, Z4082, Z4089, Z59861, Z59868, Z59869, Z8411 and Z8419 effective October 1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the Collagen Crosslinks, Any Method (190.19) NCD.									Inclined Advanced Analytics
14153.9	The module developer shall delete ICD-10-CM codes E7253 and E7801 effective September 30, 2025, from the list of ICD-10-CM codes that									Inclined Advanced Analytics

Number	Requirement	Re								
		Α	/B I	MAC	DME	Share	d-Syste	m Main	tainers	Other
		A	В	ННН	MAC	FISS	MCS	VMS	CWF	
	are covered by Medicare for the Blood Glucose Testing (190.20A) NCD.				TVIFTE					
14153.9.1	The module developer shall add ICD-10-CM codes E72530, E72538, E72539, E78010, E78011 and E78019 effective October 1, 2025, to the list of ICD-10-CM codes that are covered by Medicare for the Blood Glucose Testing (190.20A) NCD.									Inclined Advanced Analytics
14153.9.2	The module developer shall delete ICD-10-CM codes Z408, Z5986 and Z841 effective September 30, 2025, from the list of ICD-10-CM codes that are denied by Medicare for the Blood Glucose Testing (190.20A) NCD.									Inclined Advanced Analytics
14153.9.3	The module developer shall add ICD-10-CM codes Z4081, Z4082, Z4089, Z59861, Z59868, Z59869, Z8411 and Z8419 effective October 1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the Blood Glucose Testing (190.20A) NCD.									Inclined Advanced Analytics
14153.10	The module developer shall delete ICD-10-CM codes E7253 and E7801 effective September 30, 2025, from the list of ICD-10-CM codes that are covered by Medicare for the Blood Glucose Testing (190.20B) NCD.									Inclined Advanced Analytics

Number	Requirement	Re								
		A	/B I	MAC	DME	Share	d-Syste	m Main	tainers	Other
		A	В	ННН	MAC	FISS	MCS	VMS	CWF	
14153.10.1	The module developer shall add ICD-10-CM codes E72530, E72538, E72539, E78010, E78011 and E78019 effective October 1, 2025, to the list of ICD-10-CM codes that are covered by Medicare for the Blood Glucose Testing (190.20B) NCD.									Inclined Advanced Analytics
14153.10.2	The module developer shall delete ICD-10-CM codes Z408, Z5986 and Z841 effective September 30, 2025, from the list of ICD-10-CM codes that are denied by Medicare for the Blood Glucose Testing (190.20B) NCD.									Inclined Advanced Analytics
14153.10.3	The module developer shall add ICD-10-CM codes Z4081, Z4082, Z4089, Z59861, Z59868, Z59869, Z8411 and Z8419 effective October 1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the Blood Glucose Testing (190.20B) NCD.									Inclined Advanced Analytics
14153.11	The module developer shall delete ICD-10-CM codes Z408, Z5986 and Z841 effective September 30, 2025, from the list of ICD-10-CM codes that are denied by Medicare for the Glycated Hemoglobin/Glycated Protein (190.21A) NCD.									Inclined Advanced Analytics
14153.11.1	The module developer shall add ICD-10-CM codes Z4081, Z4082, Z4089, Z59861, Z59868,									Inclined Advanced Analytics

Number	Requirement	Responsibility								
		A	/B I	MAC	DME	Share	d-Syste	m Main	tainers	Other
		A	В	ННН	MAC	FISS	MCS	VMS	CWF	
	Z59869, Z8411 and Z8419 effective October 1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the Glycated Hemoglobin/Glycated Protein (190.21A) NCD.				, in re					
14153.12	The module developer shall delete ICD-10-CM codes Z408, Z5986 and Z841 effective September 30, 2025, from the list of ICD-10-CM codes that are denied by Medicare for the Glycated Hemoglobin/Glycated Protein (190.21B) NCD.									Inclined Advanced Analytics
14153.12.1	The module developer shall add ICD-10-CM codes Z4081, Z4802, Z4089, Z59861, Z59868, Z59869, Z8411 and Z8419 effective October 1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the Glycated Hemoglobin/Glycated Protein (190.21B) NCD.									Inclined Advanced Analytics
14153.13	The module developer shall delete ICD-10-CM code E7801 effective September 30, 2025, from the list of ICD-10-CM codes that are covered by Medicare for the Thyroid Testing (190.22) NCD.									Inclined Advanced Analytics
14153.13.1	The module developer shall add ICD-10-CM codes E78010, E78011 and E78019 effective October 1, 2025, to the list of ICD-10-CM codes that are covered by									Inclined Advanced Analytics

Number	Requirement	Re	spo	nsibility	7					
		A	/B I	MAC	DME	Share	d-Syste		tainers	Other
		A	В	ННН	MAC	FISS	MCS	VMS	CWF	
	Medicare for the Thyroid Testing (190.22) NCD.									
14153.13.2	The module developer shall delete ICD-10-CM codes Z408, Z5986 and Z841 effective September 30, 2025, from the list of ICD-10-CM codes that are denied by Medicare for the Thyroid Testing (190.22) NCD.									Inclined Advanced Analytics
14153.13.3	The module developer shall add ICD-10-CM codes Z4081, Z4082, Z4089, Z59861, Z59868, Z59869, Z8411 and Z8419 effective October 1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the Thyroid Testing (190.22) NCD.									Inclined Advanced Analytics
14153.14	The module developer shall delete ICD-10-CM codes E7801 and E881 effective September 30, 2025, from the list of ICD-10-CM codes that are covered by Medicare for the Lipids Testing (190.23A) NCD.									Inclined Advanced Analytics
14153.14.1	The module developer shall add ICD-10-CM codes E78010, E78011, E78019, E8810, E8811, E8812, E8813, E8814 and E8819 effective October 1, 2025, to the list of ICD-10-CM codes that are covered by Medicare for the Lipids Testing (190.23A) NCD.									Inclined Advanced Analytics
14153.14.2	The module developer shall delete ICD-10-CM codes Z408, Z5986 and									Inclined Advanced Analytics

Number	Requirement	Re	spoi	nsibility	7					
		A	/B I	MAC	DME	Share	d-Syste	m Main	tainers	Other
		A	В	ННН	MAC	FISS	MCS	VMS	CWF	
	Z841 effective September 30, 2025, from the list of ICD-10- CM codes that are denied by Medicare for the Lipids Testing (190.23A) NCD.									
14153.14.3	The module developer shall add ICD-10-CM codes Z4081, Z4082, Z4089, Z59861, Z59868, Z59869, Z8411 and Z8419 effective October 1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the Lipids Testing (190.23A) NCD.									Inclined Advanced Analytics
14153.15	The module developer shall delete ICD-10-CM codes E7801 and E881 effective September 30, 2025, from the list of ICD-10-CM codes that are covered by Medicare for the Lipids Testing (190.23B) NCD.									Inclined Advanced Analytics
14153.15.1	The module developer shall add ICD-10-CM codes E78010, E78011, E78019, E8810, E8811, E8812, E8813, E8814 and E8819 effective October 1, 2025, to the list of ICD-10-CM codes that are covered by Medicare for the Lipids Testing (190.23B) NCD.									Inclined Advanced Analytics
14153.15.2	The module developer shall delete ICD-10-CM codes Z408, Z5986 and Z841 effective September 30, 2025, from the list of ICD-10-CM codes that are denied by Medicare for the Lipids Testing									Inclined Advanced Analytics

Number	Requirement	Responsibility								
		A/B MAC			DME		d-Syste	m Main	tainers	Other
		A	В	ННН	MAC	FISS	MCS	VMS	CWF	
	(190.23B) NCD.									
14153.15.3	The module developer shall add ICD-10-CM codes Z4081, Z4082, Z4089, Z59861, Z59868, Z59869, Z8411 and Z8419 effective October 1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the Lipids Testing (190.23B) NCD.									Inclined Advanced Analytics
14153.16	The module developer shall delete ICD-10-CM codes Z408, Z5986 and Z841 effective September 30, 2025, from the list of ICD-10-CM codes that are denied by Medicare for the Digoxin Therapeutic Drug Assay (190.24) NCD.									Inclined Advanced Analytics
14153.16.1	The module developer shall add ICD-10-CM codes Z4081, Z4082, Z4089, Z59861, Z59868, Z59869, Z8411 and Z8419 effective October 1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the Digoxin Therapeutic Drug Assay (190.24) NCD.									Inclined Advanced Analytics
14153.17	The module developer shall delete ICD-10-CM codes Z408, Z5986 and Z841 effective September 30, 2025, from the list of ICD-10-CM codes that are denied by Medicare for the Alpha-fetoprotein (190.25) NCD.									Inclined Advanced Analytics

Number	Requirement	Responsibility								
		A	/B I	MAC	DME	Share		m Main	tainers	Other
		A	В	ННН	MAC	FISS	MCS	VMS	CWF	
14153.17.1	The module developer shall add ICD-10-CM codes Z4081, Z4082, Z4089, Z59861, Z59868, Z59869, Z8411 and Z8419 effective October 1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the Alpha-fetoprotein (190.25) NCD.									Inclined Advanced Analytics
14153.18	The module developer shall delete ICD-10-CM codes Z408, Z5986 and Z841 effective September 30, 2025, from the list of ICD-10-CM codes that are denied by Medicare for the Carcinoembryonic Antigen (190.26) NCD.									Inclined Advanced Analytics
14153.18.1	The module developer shall add ICD-10-CM codes Z4081, Z4082, Z4089, Z59861, Z59868, Z59869, Z8411 and Z8419 effective October 1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the Carcinoembryonic Antigen (190.26) NCD.									Inclined Advanced Analytics
14153.19	The module developer shall delete ICD-10-CM code R102 effective September 30, 2025, from the list of ICD-10-CM codes that are covered by Medicare for the Human Chorionic Gonadotropin (190.27) NCD.									Inclined Advanced Analytics
14153.19.1	The module developer shall add ICD-10-CM codes R1020, R1021, R1022, R1023 and									Inclined Advanced Analytics

Number	Requirement	Responsibility								
		Α		MAC	DME			m Main		Other
		A	В	ННН	MAC	FISS	MCS	VMS	CWF	
	R1024 effective October 1, 2025, to the list of ICD-10-CM codes that are covered by Medicare for the Human Chorionic Gonadotropin (190.27) NCD.									
14153.19.2	The module developer shall delete ICD-10-CM codes Z408, Z5986 and Z841 effective September 30, 2025, from the list of ICD-10-CM codes that are denied by Medicare for the Human Chorionic Gonadotropin (190.27) NCD.									Inclined Advanced Analytics
14153.19.3	The module developer shall add ICD-10-CM codes Z4081, Z4082, Z4089, Z59861, Z59868, Z59869, Z8411 and Z8419 effective October 1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the Human Chorionic Gonadotropin (190.27) NCD.									Inclined Advanced Analytics
14153.20	The module developer shall delete ICD-10-CM codes Z408, Z5986 and Z841 effective September 30, 2025, from the list of ICD-10-CM codes that are denied by Medicare for the Tumor Antigen by Immunoassay CA 125 (190.28) NCD.									Inclined Advanced Analytics
14153.20.1	The module developer shall add ICD-10-CM codes Z4081, Z4082, Z4089, Z59861, Z59868, Z59869, Z8411 and Z8419 effective October									Inclined Advanced Analytics

Number	Requirement	Re	spo	nsibility	7					
		A	/B]	MAC	DME	Share	i -	m Main	tainers	Other
		A	В	ННН	MAC	FISS	MCS	VMS	CWF	
	1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the Tumor Antigen by Immunoassay CA 125 (190.28) NCD.									
14153.21	The module developer shall delete ICD-10-CM codes Z408, Z5986 and Z841 effective September 30, 2025, from the list of ICD-10-CM codes that are denied by Medicare for the Tumor Antigen by Immunoassay CA 15-3/CA 27.29 (190.29) NCD.									Inclined Advanced Analytics
14153.21.1	The module developer shall add ICD-10-CM codes Z4081, Z4082, Z4089, Z59861, Z59868, Z59869, Z8411 and Z8419 effective October 1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the Tumor Antigen by Immunoassay CA 15-3/CA 27.29 (190.29) NCD.									Inclined Advanced Analytics
14153.22	The module developer shall delete ICD-10-CM codes Z408, Z5986 and Z841 effective September 30, 2025, from the list of ICD-10-CM codes that are denied by Medicare for the Tumor Antigen by Immunoassay CA 19-9 (190.30) NCD.									Inclined Advanced Analytics
14153.22.1	The module developer shall add ICD-10-CM codes Z4081, Z4082, Z4089, Z59861, Z59868, Z59869, Z8411 and									Inclined Advanced Analytics

Number	Requirement	Re	spoi	nsibility	7					
		Α	/B I	MAC	DME	Share	d-Syste	m Main	tainers	Other
		A	В	ННН	MAC	FISS	MCS	VMS	CWF	
	Z8419 effective October 1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the Tumor Antigen by Immunoassay CA 19-9 (190.30) NCD.									
14153.23	The module developer shall delete ICD-10-CM codes Z408, Z5986 and Z841 effective September 30, 2025, from the list of ICD-10-CM codes that are denied by Medicare for the Prostate Specific Antigen (190.31) NCD.									Inclined Advanced Analytics
14153.23.1	The module developer shall add ICD-10-CM codes Z4081, Z4082, Z4089, Z59861, Z59868, Z59869, Z8411 and Z8419 effective October 1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the Prostate Specific Antigen (190.31) NCD.									Inclined Advanced Analytics
14153.24	The module developer shall delete ICD-10-CM codes E7801 and T781XXA effective September 30, 2025, from the list of ICD-10-CM codes that are covered by Medicare for the Gamma Glutamyl Transferase (190.32) NCD.									Inclined Advanced Analytics
14153.24.1	The module developer shall add ICD-10-CM codes E78010, E78011 and E78019 effective October 1, 2025, to the list of ICD-10-CM codes that are covered by Medicare for the Gamma									Inclined Advanced Analytics

Number	Requirement	Re	spo	nsibility	7					
		Α	/B I	MAC	DME	Share	d-Syste		tainers	Other
		A	В	ННН	MAC	FISS	MCS	VMS	CWF	
	Glutamyl Transferase (190.32) NCD.									
14153.24.2	The module developer shall delete ICD-10-CM codes Z408, Z5986 and Z841 effective September 30, 2025, from the list of ICD-10-CM codes that are denied by Medicare for the Gamma Glutamyl Transferase (190.32) NCD.									Inclined Advanced Analytics
14153.24.3	The module developer shall add ICD-10-CM codes Z4081, Z4082, Z4089, Z59861, Z59868, Z59869, Z8411 and Z8419 effective October 1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the Gamma Glutamyl Transferase (190.32) NCD.									Inclined Advanced Analytics
14153.25	The module developer shall delete ICD-10-CM code R102 effective September 30, 2025, from the list of ICD-10-CM codes that are covered by Medicare for the Hepatitis Panel/Acute Hepatitis Panel (190.33) NCD.									Inclined Advanced Analytics
14153.25.1	The module developer shall add ICD-10-CM codes R1020, R1021, R1022, R1023 and R1024 effective October 1, 2025, to the list of ICD-10-CM codes that are covered by Medicare for the Hepatitis Panel/Acute Hepatitis Panel (190.33) NCD.									Inclined Advanced Analytics

Number	Requirement	Responsibility								
		A	/B]	MAC	DME	Share		m Main	tainers	Other
		A	В	ННН	MAC	FISS	MCS	VMS	CWF	
14153.25.2	The module developer shall delete ICD-10-CM codes Z408, Z5986 and Z841 effective September 30, 2025, from the list of ICD-10-CM codes that are denied by Medicare for the Hepatitis Panel/Acute Hepatitis Panel (190.33) NCD.									Inclined Advanced Analytics
14153.25.3	The module developer shall add ICD-10-CM codes Z4081, Z4082, Z4089, Z59861, Z59868, Z59869, Z8411 and Z8419 effective October 1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the Hepatitis Panel/Acute Hepatitis Panel (190.33) NCD.									Inclined Advanced Analytics
14153.26	The module developer shall delete ICD-10-CM code R102 effective September 30, 2025, from the list of ICD-10-CM codes that are covered by Medicare for the Fecal Occult Blood Test (190.34) NCD.									Inclined Advanced Analytics
14153.26.1	The module developer shall add ICD-10-CM codes R1020, R1021, R1022, R1023 and R1024 effective October 1, 2025, to the list of ICD-10-CM codes that are covered by Medicare for the Fecal Occult Blood Test (190.34) NCD.									Inclined Advanced Analytics
14153.26.2	The module developer shall delete ICD-10-CM codes Z408, Z5986 and Z841 effective									Inclined Advanced Analytics

Number	Requirement	Responsibility								
		Α	/B I	MAC	DME	Share	d-Syste	m Main	tainers	Other
		A	В	ННН	MAC	FISS	MCS	VMS	CWF	
	September 30, 2025, from the list of ICD-10-CM codes that are denied by Medicare for the Fecal Occult Blood Test (190.34) NCD.									
14153.26.3	The module developer shall add ICD-10-CM codes Z4081, Z4082, Z4089, Z59861, Z59868, Z59869, Z8411 and Z8419 effective October 1, 2025, to the list of ICD-10-CM codes that are denied by Medicare for the Fecal Occult Blood Test (190.34) NCD.									Inclined Advanced Analytics
14153.27	The module developer shall provide the revised software as a mainframe (i.e., load module) to CMS to be distributed to the SSMs.									Inclined Advanced Analytics
14153.28	The SSMs shall install the edit module after testing and distribute it to the contractors as part of their routine release.					X	X			

IV. PROVIDER EDUCATION

Medicare Learning Network® (MLN): CMS will develop and release national provider education content and market it through the MLN Connects® newsletter shortly after we issue the CR. MACs shall link to relevant information on your website and follow IOM Pub. No. 100-09 Chapter 6, Section 50.2.4.1 for distributing the newsletter to providers. When you follow this manual section, you don't need to separately track and report MLN content releases. You may supplement with your local educational content after we release the newsletter.

Impacted Contractors: A/B MAC Part A, A/B MAC Part B

V. SUPPORTING INFORMATION

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

"Should" denotes a recommendation.

X-Ref	Recommendations or other supporting information:
Requirement	
Number	

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):

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