

**Healthcare Common Procedure**

**Coding System (HCPCS)**

**Updates for 2024**

On January 1, 2024, Health First Colorado (Colorado’s Medicaid program) implemented the annual 2024 Healthcare Common Procedure Coding System (HCPCS) additions, deletions and changes effective for dates of service on or after January 1, 2024. Visit the [Provider Rates and Fee Schedules web page](#) for updates.

Claims billed with a HCPCS 2024 procedure code will suspend for EOB 0000 - “This claim/service is pending for program review” until the updates are completed in the Colorado interChange. The claims will be released once the rates are loaded.

Code descriptions are not contained in this bulletin. The descriptions are copyrighted by the American Medical Association (AMA). Providers should reference the 2024 HCPCS and Current Procedural Terminology (CPT) coding manuals for procedure code descriptions. These coding manuals may be purchased through the AMA and publishers such as OptumInsight.

**Discontinued Codes**

The following is a list of procedure codes that have been discontinued by the Centers for Medicare & Medicaid Services (CMS) and the AMA. Codes that have been discontinued or cross-referenced to other codes can be found in the 2024 HCPCS and CPT coding manuals. The discontinued procedure codes will not be reimbursed for dates of service after December 31, 2023.

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Discontinued Codes						
74710	0031A	0121A	0434T	C9155	G9451	K1016
91300	0034A	0124A	0435T	C9156	G9453	K1017
91301	0041A	0134A	0436T	C9157	G9454	K1018
91303	0042A	0141A	0465T	C9158	G9596	K1019
91305	0044A	0142A	0499T	J9160	G9612	K1020
91306	0051A	0144A	0501T	S0166	G9613	K1021
91307	0052A	0151A	0502T	S0171	G9614	K1022
91308	0053A	0154A	0503T	G0056	G9697	K1023
91309	0054A	0164A	0504T	G2066	G9715	K1024
91311	0064A	0171A	0508T	G2108	G9725	K1025
91312	0071A	0172A	0533T	G2109	G9852	K1026
91313	0072A	0173A	0534T	G2110	G9853	K1028
91314	0073A	0174A	0535T	G8506	G9854	K1029
91315	0074A	0404T	0536T	G8818	G9927	K1031
91316	0081A	0424T	0641T	G8825	G9995	K1032
91317	0082A	0425T	0642T	G8852	K1001	K1033
0001A	0083A	0426T	0715T	G8883	K1002	M1156
0002A	0091A	0427T	0768T	G8884	K1003	M1157
0003A	0092A	0428T	0769T	G8885	K1005	M1158
0004A	0093A	0429T	0775T	G8941	K1006	
0011A	0094A	0430T	0809T	G8963	K1009	
0012A	0111A	0431T	C9152	G8964	K1013	
0013A	0112A	0432T	C9153	G9192	K1014	
0014M	0113A	0433T	C9154	G9229	K1015	

## New Procedure Codes

The following is a list of new procedure codes that are covered benefits under Health First Colorado, effective for dates of service on or after January 1, 2024.

Durable Medical Equipment (DME) and Supply						
E0492	E0943	E0530	E0678	E0679	E0680	E0681
E0682	E0732	E0733	E0734	E0735	E2001	E3000
L3161	L5615	L5926				
Outpatient Prospective Payment System (PPS) Drugs, Biologicals and Devices						
C1600	C1601	C1602	C1603	C1604	C7556	C7557
C7558	C7560	C7903	C9793	C9794	C9795	
Medicare Crossover						
G0019	G0022	G0023	G0024	G0136	Q0516	Q0517
Q0518	M1211	M1212	M1213	M1214	M1215	M1216

M1217	M1218	M1219	M1220	M1221	M1222	M1223
M1224	M1225	M1226	M1227	M1228	M1229	M1230
M1231	M1231	M1232	M1233	M1234	M1235	M1236
M1237	M1238	M1239	M1240	M1241	M1242	M1243
M1244	M1245	M1246	M1247	M1248	M1249	M1250
M1251	M1252	M1253	M1254	M1255	M1256	M1257
M1258	M1259	M1260	M1261	M1262	M1263	M1264
M1265	M1266	M1267	M1268	M1269	M1270	M1271
M1272	M1273	M1274	M1275	M1276	M1277	M1278
M1279	M1280	M1281	M1282	M1283	M1284	M1285
M1286	M1287	M1288	M1289	M1290	M1300	M1301
M1302	M1303	M1304	M1305	M1306	M1307	M1308
M1309	M1310	M1311	M1312	M1313	M1314	M1315
M1316	M1317	M1318	M1319	M1320	M1321	M1322
M1323	M1324	M1325	M1326	M1327	M1328	M1329
M1330	M1331	M1332	M1333	M1334	M1335	M1336
M1337	M1338	M1339	M1340	M1341	M1342	M1343
M1344	M1345	M1346	M1347	M1348	M1349	M1350
M1351	M1352	M1353	M1354	M1355	M1356	M1357
M1358	M1359	M1360	M1361	M1362	M1363	M1364
M1365	M1366	M1367	M1368	M1369	M1370	
<b>Pathology and Laboratory</b>						
81457	81458	81459	81462	81463	81464	81517
82166	86041	86042	86043	86366	87523	0420U
0421U	0422U	0423U	0424U	0425U	0426U	0427U
0428U	0429U	0430U	0431U	0432U	0433U	0434U
0435U	0436U	0437U	0438U			
<b>Surgery</b>						
22836	22837	22838	27278	31242	31243	33276
33277	33278	33279	33280	33281	33287	33288
52284	58580	61889	61891	61892	64596	64597
64598	67516					
<b>Physician Administered Drugs (PADs)/Biologicals</b>						
J0184	J0217	J0391	J0402	J0576	J0688	J0750
J0751	J0799	J0873	J1105	J1304	J1412	J1413
J1596	J1939	J2404	J2508	J2679	J2799	J3401
J3425	J9052	J9072	J9172	J9255	J9258	J9286
J9321	J9324	J9333	J9334	C9161	C9162	C9163
C9164	C9165	Q5132				
<b>Radiology</b>						
75580	76984	76987	76988	76989	0815T	0857T

0858T	0859T	0860T				
Wound Care/Skin Substitutes						
Q4279	Q4287	Q4288	Q4289	Q4290	Q4291	Q4292
Q4293	Q4294	Q4295	Q4296	Q4297	Q4298	Q4299
Q4300	Q4301	Q4302	Q4303	Q4304		
Medicine						
90623	92622	92623	92972	93150	93151	93152
93153	93584	93585	93586	93587	93588	96380
96381	96547	96548	99459			
Medical and Surgical Supplies						
A4287	A4457	A4468	A4540	A4541	A4542	A6520
A6521	A6522	A6523	A6524	A6525	A6526	A6527
A6528	A6529	A6552	A6553	A6554	A6555	A6556
A6557	A6558	A6559	A6560	A6561	A6562	A6563
A6564	A6565	A6566	A6567	A6568	A6569	A6570
A6571	A6572	A6573	A6574	A6575	A6576	A6577
A6578	A6579	A6580	A6581	A6582	A6583	A6584
A6585	A6586	A6587	A6588	A6589	A6593	A6594
A6595	A6596	A6597	A6598	A6599	A6600	A6601
A6602	A6603	A6604	A6605	A6606	A6607	A6608
A6609	A6610	A7023	A9608	A9609		

## Procedure Codes with Description Changes

Many HCPCS codes had a short- or long-description change effective January 1, 2024. The following is a list of procedure codes with short- or long-description changes.

Description Changes						
64595	81171	81172	81243	81244	81403	81404
81406	81407	81408	81445	81449	81450	81451
81455	81456	87467	87593	90611	90622	91304
93241	93242	93243	93244	93245	93246	93247
93248	99202	99203	99204	99205	99212	99213
99214	99215	99306	99308	0019M	0104A	0412U
0519T	0520T	0587T	0588T	0589T	0590T	0640T
0656T	0657T	3096F	6030F	A6531	A6532	A6545
D2335	G0129	G0410	G0411	G2137	G2139	G2141
G2147	G2174	G8474	G8535	G8601	G8807	G8851
G8854	G8855	G8924	G8936	G8942	G8968	G9380
G9382	G9452	G9696	G9698	G9703	G9717	G9771
G9772	G9773	G9779	G9780	G9914	G9938	G9990

Description Changes						
G9991	G9998	M0005	M0201	M1174	M1176	M1197
M1198	M1205	M1206	M1207	M1208	Q4225	T1026

### Ambulatory Surgery Center (ASC) HCPCS

Per Department rule [10 CCR 8.570.3.A.1](#), only procedures approved by the Centers for Medicare & Medicaid Services (CMS) as allowable in an ASC setting may be reimbursed in an ASC. The CMS ASC Approved HCPCS Codes and Payment Rates for 2024 will be reviewed when it is available.

Procedures the Department determines appropriate for ASC reimbursement will be added to the [Ambulatory Surgery Centers \(ASC\) Billing Manual](#), located on the [Billing Manuals web page](#), and the List of All ASC Codes and Respective Groupers, located on the [Provider Rates and Fee Schedule web page](#).

Contact Chris Lane at [Christopher.Lane@state.co.us](mailto:Christopher.Lane@state.co.us) with any questions related to ASC HCPCS.

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