

Therapy	ICD-10 Code	ICD-10 Descriptions	HCPCS Code	HCPCS Descriptions	CPT Code	CPT Description					
Luxturna	H35.50	Unspecified hereditary retinal dystrophy Other indexing guidance for H35.50: Leber's congenital amaurosis Best's disease	J3398	Injection, Luxturna (voretigene neparvovec-rzyl), 1 billion vector genomes	67036 67299	Vitrectomy, mechanical, pars plana approach Unlisted procedure, posterior segment					
	H35.52	Pigmentary retinal dystrophy Retinitis pigmentosa									
	H35.54	Dystrophies primarily involving the retinal pigment epitheliu									
Zolgensma	G12.0	Infantile spinal muscular atrophy, type 1	J3399	Injection, Zolgensma (onasemnogene abeparvovec-xioi), per treatment up to 5×1015 vector genomes	96365	IV infusion, for therapy, prophylaxis, or diagnosis; initial, up to one					
	G12.1	Other inherited spinal muscular atrophy			99218- 99220	Initial observation care, per day, for the evaluation and management of a patient, which requires these 3 key components: a detailed or comprehensive history, a detailed or comprehensive examination, and medical decision-making that is straightforward or of low complexity, moderate complexity, or high complexity					
	G12.25	Progressive spinal muscular atrophy			99234- 99236	Observation care admission and discharge services for the evaluation and management of a patient including admission and discharge on the same date, which requires these 3 key components: detailed or comprehensive history, a detailed or comprehensive examination, and medical decision-making that is straightforward or of low complexity, moderate complexity, or high complexity					
	G12.8	Other spinal muscular atrophies and related syndromes									
	G12.9	Spinal muscular atrophy, unspecified									
Spinraza	G12.0	Infantile spinal muscular atrophy, type 1	J2326	INJECTION, NUSINERSEN, 0.1 MG	96450	Chemotherapy administration, into central nervous system (CNS) (e.g. intrathecal), requiring spinal puncture					
	G12.1	Other inherited spinal muscular atrophy									
	G12.25	Progressive spinal muscular atrophy									
	G12.8	Other spinal muscular atrophies and related syndromes									
	G12.9	Spinal muscular atrophy, unspecified									
Zynteglo	D56	Thalassemia	J3490	Unclassified drugs	96413	Chemotherapy administration, intravenous infusion technique; up to 1 hour, single or initial substance/drug					
	D56.1	Beta Thalassemia	J3590	Unclassified biologics							
	D56.2	Delta-beta Thalassemia	J3393	Injection, betibeglogene autotemcel, per treatment (Eff. 7/1/2024)	96415	Chemotherapy administration, intravenous infusion technique; each additional hour					
	D56.3	Thalassemia minor									
	D56.4	Hereditary persistence of fetal hemoglobin (HPFH)									
	D56.5	Hemoglobin E-beta thalassemia									
	D56.8	Other thalassemia									
D56.9	Thalassemia, unspecified										
Skysona	E71.52	X-linked adrenoleukodystrophy	J3490	Unclassified drugs	96413	Chemotherapy administration, intravenous infusion technique; up to 1 hour, single or initial substance/drug					
	E71.520	Childhood cerebral X-linked adrenoleukodystrophy	J3590	Unclassified biologics	96415	Chemotherapy administration, intravenous infusion technique; each additional hour					
	E71.521	Adolescent X-linked adrenoleukodystrophy									
	E71.522	Adrenomyeloneuropathy									
	E71.528	Other X-linked adrenoleukodystrophy									
	E71.529	X-linked adrenoleukodystrophy, unspecified type									
Hemgenix	D67	Hereditary factor IX deficiency	J1411	Injection, etranacogene dezaparvovec-drib, per therapeutic dose	96365	Infusion first hour 96366 Infusion each additional hour					
	D68	Other coagulation defects									
Roctavian	D66	Hereditary factor VIII deficiency	C9399	Unclassified drugs or biologicals	96365	Intravenous infusion, for therapy, prophylaxis, or diagnosis (specify substance or drug); initial, up to 1 hour					
			E0780	Ambulatory infusion pump, mechanical, reusable, for infusion less than 8 hours	96366	Intravenous infusion, for therapy, prophylaxis, or diagnosis (specify substance or drug); each additional hour					
			J3490	Unclassified drugs	99221	Initial hospital inpatient or observation care, per day, for the evaluation and management of a patient, which requires a medically appropriate history and/ or examination and straightforward or lowlevel medical decision-making. When using total time on the date of the encounter for code selection, 40 minutes must be met or exceeded.					
			J3590	Unclassified biological	99222	Initial hospital inpatient or observation care, per day, for the evaluation and management of a patient, which requires a medically appropriate history and/ or examination and moderate level of medical decision-making. When using total time on the date of the encounter for code selection, 55 minutes must be met or exceeded.					
					99223	Initial hospital inpatient or observation care, per day, for the evaluation and management of a patient, which requires a medically appropriate history and/or examination and high level of medical decision making. When using total time on the date of the encounter for code selection, 75 minutes must be met or exceeded.					
					99234	Hospital inpatient or observation care, for the evaluation and management of a patient including admission and discharge on the same date, which requires a medically appropriate history and/or examination and straightforward or low level of medical decisionmaking. When using total time on the date of the encounter for code selection, 45 minutes must be met or exceeded.					
Lyfgenia	D57	Sickle-cell disorders	C9399	Unclassified drugs or biologicals	96413	Chemotherapy administration, intravenous infusion technique; up to 1 hour, single or initial substance/drug					
	D57.0-D57.09	Hb-SS disease with crisis	J3490	Unclassified drugs							
	D57.1	Sickle-cell disease without crisis	J3590	Unclassified biologics							
	D57.2-D57.219	Sickle-cell/Hb-C disease	J3394	Injection, lovotibeglogene autotemcel, per treatment (Eff. 7/1/2024)	96415	Chemotherapy administration, intravenous infusion technique; each additional hour					
	D57.3	Sickle-cell trait									
	D57.4-D57.459	Sickle-cell thalassemia									
	D57.8-D57.819	Other sickle-cell disorders									
Casgevy	D57	Sickle-cell disorders	C9399	Unclassified drugs or biologicals	38241	Hematopoietic progenitor cell (HPC); autologous transplantation (Casgevy)					
	D57.0-D57.09	Hb-SS disease with crisis	J3490	Unclassified drugs							
	D57.1	Sickle-cell disease without crisis	J3590	Unclassified biologics							
	D57.2-D57.219	Sickle-cell/Hb-C disease									
	D57.3	Sickle-cell trait									
	D57.4-D57.459	Sickle-cell thalassemia									
	D57.8-D57.819	Other sickle-cell disorders									
Elevidys	G71.01	Duchenne or Becker muscular dystrophy	C9399	Unclassified drugs or biologicals	TBD						
			J3490	Unclassified drugs							
			J3590	Unclassified biologics							
Lenmeldy	E75.25	Metachromatic leukodystrophy	J3590	Unclassified biologics							
Carvykti*	C90.0	Multiple Myeloma and malignant plasma cell neoplasms	Q2056	Carvykti (Ciltacabtagene autoleucl), up to 100 million autologous b-cell maturation antigen (BCMA) directed car-positive t cells, including leukapheresis and dose preparation procedures, per therapeutic dose.	0540T	Infusion of modified cells					
	C90.00	Multiple Myeloma not having achieved remission									
	C90.01	Multiple myeloma in remission									
	C90.02	Multiple myeloma in relapse									
Abecma*	C90.0	Multiple Myeloma and malignant plasma cell neoplasms	Q2055	Abecma (idecabtagene vicleucl), up to 460 million autologous B-cell maturation antigen (BCMA) directed CAR-positive T cells, including leukapheresis and dose preparation procedures, per therapeutic dose.	0540T	Infusion of modified cells					
	C90.00	Multiple Myeloma not having achieved remission									
	C90.01	Multiple myeloma in remission									
	C90.02	Multiple myeloma in relapse									
Rethymic*	D82.1	Di George's Syndrome	J3590	Unclassified biologics							
	D82.8	Immunodeficiency associated with other specified major defects	C9399	Unclassified drugs or biologicals							
Kebilidi	E70.81	Aromatic L-amino acid decarboxylase deficiency	J3590	Unclassified biologics	TBD						
Zevaskyn	XHROXGA	Replacement of Head and Neck Skin with Prademagene Zamikeracel, Genetically Engineered Autologous Cell Therapy, External Approach, New Technology Group 10	C9399	Unclassified drugs or biologicals	96999	Unlisted special dermatological service or procedure					
	XHR1XGA	Replacement of Chest Skin with Prademagene Zamikeracel, Genetically Engineered Autologous Cell Therapy, External Approach, New Technology Group 10									
	XHR2XGA	Replacement of Abdomen Skin with Prademagene Zamikeracel, Genetically Engineered Autologous Cell Therapy, External Approach, New Technology Group 10									
	XHR3XGA	Replacement of Back Skin with Prademagene Zamikeracel, Genetically Engineered Autologous Cell Therapy, External Approach, New Technology Group 10									
	XHR4XGA	Replacement of Right Upper Extremity Skin with Prademagene Zamikeracel, Genetically Engineered Autologous Cell Therapy, External Approach, New Technology Group 10	J3490	Unclassified drugs							
	XHR5XGA	Replacement of Left Upper Extremity Skin with Prademagene Zamikeracel, Genetically Engineered Autologous Cell Therapy, External Approach, New Technology Group 10									
	XHR6XGA	Replacement of Right Lower Extremity Skin with Prademagene Zamikeracel, Genetically Engineered Autologous Cell Therapy, External Approach, New Technology Group 10					J3590	Unclassified biologics			
	XHR7XGA	Replacement of Left Lower Extremity Skin with Prademagene Zamikeracel, Genetically Engineered Autologous Cell Therapy, External Approach, New Technology Group 10									
Tecelra	C38.0-C38.8	Malignant neoplasm of heart, mediastinum and pleura	C9399	Unclassified drugs or biologicals	38999	Unlisted procedure, hemic or lymphatic system					
	C48.1-C48.8	Malignant neoplasm of retroperitoneum and peritoneum	J3490	Unclassified drugs	96413	Chemotherapy administration, intravenous infusion technique; up to 1 hour, single or initial substance/drug					
			J3590	Unclassified biologics							
		C49.0-C49.9	Malignant neoplasm of connective and soft tissue	J9999	Not otherwise classified, antineoplastic	96415	Chemotherapy administration, intravenous infusion technique; each additional hour				
Encelto	TBD		TBD		TBD						