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Clinical Profile Documentation

Problems

Additions

The **Problems > Add Details** area is updated with applicable documentation points for the following diagnoses.

BRAF mutation is now available for **Pancreatic Cancer** with the following documentation points:

- BRAF V600E (Mutated)
- Wild-type
- Mutations
- Unknown

RET gene mutation is now available for **Pancreatic Cancer** with the following documentation points:

- RET fusion positive
- RET fusion negative
- Ordered: Result pending
- Not performed
- Unknown

New items are available for documentation in **Problems** and appear in the **Charge Capture Report (CCR)**. Additional ICD-10 codes may be displayed to present the surrounding nodes.

Problem	ICD-10 Codes
At high risk for breast cancer (finding)	Z91.89 Other specified personal risk factors, not elsewhere classified
BMI 25-29 overweight	Z68.26 Body mass index [BMI] 26.0-26.9, adult Z68.27 Body mass index [BMI] 27.0-27.9, adult Z68.28 Body mass index [BMI] 28.0-28.9, adult Z68.29 Body mass index [BMI] 29.0-29.9, adult

Problem	ICD-10 Codes
Breast lump (finding)	N63.10 Unspecified lump in the right breast, unspecified quadrant N63.11 Unspecified lump in the right breast, upper outer quadrant N63.12 Unspecified lump in the right breast, upper inner quadrant N63.13 Unspecified lump in the right breast, lower outer quadrant N63.14 Unspecified lump in the right breast, lower inner quadrant N63.15 Unspecified lump in the right breast, overlapping quadrants N63.20 Unspecified lump in the left breast, unspecified quadrant N63.21 Unspecified lump in the left breast, upper outer quadrant N63.22 Unspecified lump in the left breast, upper inner quadrant N63.23 Unspecified lump in the left breast, lower outer quadrant N63.24 Unspecified lump in the left breast, lower inner quadrant N63.25 Unspecified lump in the left breast, overlapping quadrants N63.3 Unspecified lump in axillary tail N63.31 Unspecified lump in axillary tail, of the right breast N63.32 Unspecified lump in axillary tail, of the left breast N63.41 Unspecified lump in right breast, subareolar N63.42 Unspecified lump in left breast, subareolar

Lab, Analytes, Panels & Orders

Additions

- 6-acetylmorphine, urine (cutoff 5 ng/mL)
- Alpha globin DNA analysis panel
- Anticoagulants, urine, qual
- Antidiabetics, urine, qual

- Antihistamines, urine, qual
- C. pneumoniae PCR
- Cardiac, urine, qual
- Codeine, urine (cutoff 5 ng/mL)
- Cough suppressants, urine, qual
- CSF monocyte/macrophage panel
- CSF monocyte/macrophage, %
- D-dimer, mg/dL
- Dihydrocodeine, urine
- EDDP, urine
- EDDP, urine (cutoff 10 ng/mL)
- FOLR1
- Histoplasma mycelial, CF
- HLA-B
- HLA-C
- HPV genotype reflex
- HRD-GSS
- Hydrocodone, urine (cutoff 5 ng/mL)
- Hydromorphone, urine (cutoff 5 ng/mL)
- Invitae antithrombin III deficiency test panel
- Invitae antithrombin III deficiency test result
- Lining cells, body fluid
- Meperidine, urine (cutoff 10 ng/mL)
- Methadone, urine (cutoff 10 ng/mL)
- Methamphetamines D+L, urine, ng/mL
- Morphine, urine (cutoff 5 ng/mL)
- Muscle relaxants, urine, qual
- Naloxone, urine (cutoff 10 ng/mL)
- N-Desmethylnaltrexone, urine (cutoff 5 ng/mL)
- Nalbuphine, urine (cutoff 5 ng/mL)
- Norfentanyl, urine (cutoff 5 ng/mL)
- Normeperidine, urine
- NSAIDS, urine, qual
- O-desmethyl-CIS-tramadol, urine (cutoff 100 ng/dL)
- Opioids, urine, qual
- Oxycodone, urine (cutoff 5 ng/mL)
- Oxymorphone, urine (cutoff 5 ng/mL)
- Sedative-hypnotics, urine, qual
- Tapentadol, urine (cutoff 5 ng/mL)
- Tramadol, urine (cutoff 10 ng/mL)
- Zinc protoporphyrin
- (ZPP), whole blood

Updates

- CT chest low dose w/o contrast has been updated to CT chest low dose **radiation** w/o contrast

Medications

Additions

- 212-PB-Dotamate invest IV
- ABBV-319 invest IV
- Gedatolisib invest IV
- Rejuvaskin Skin Recovery Cream

Updates

Medication	Update
Elahere (mirvetuximab soravtansine-gynx)	J3590 per 100 mg
Impact Advanced Recovery Oral Liquid	NDC now available: <ul style="list-style-type: none"> 43900094311 43900022910
Impact Advanced Recovery Oral Liquid	Dispensable form now available: 0.1 gram-1.12 kcal/mL liquid
Tzield (teplizumab-mzvw)	J3590 per 2 mg

Regimen Library

This section does not contain clinical trial regimens.

Additions

Regimen Name	Diagnosis
Abraxane D1,15 + Gemcitabine D1,15 Q28D (Modified)	Pancreatic Cancer
Cemiplimab-rwlc + Paclitaxel + Carboplatin Q21D	Lung Cancer, Non-small Cell (NSCLC)
Cemiplimab-rwlc + Paclitaxel + Cisplatin Q21D	Lung Cancer, Non-small Cell (NSCLC)

Regimen Name	Diagnosis
Cemiplimab-rwlc + Pemetrexed + Carboplatin Q21D	Lung Cancer, Non-small Cell (NSCLC)
Cemiplimab-rwlc + Pemetrexed + Cisplatin Q21D	Lung Cancer, Non-small Cell (NSCLC)
Cobimetinib D1-21 Q28D (Histiocytic Neoplasms)	Hematologic Malignancies (Parent); Histiocytosis
Fluorouracil (Bolus + CIV) D1-2 + Leucovorin + Oxaliplatin (FOLFOX 6, Modified) + Cetuximab Q14D	Colon Cancer; Rectal Cancer
Mirvetuximab soravtansine-gynx Q21D	Fallopian Tube Cancer; Ovarian and Primary Peritoneal Cancer
Nivolumab + Cetuximab Q14D	Head and Neck Cancer (Parent)
Nivolumab + Gemcitabine D1,8 + Carboplatin Q21D (Neoadjuvant NSCLC)	Lung Cancer, Non-small Cell (NSCLC)
Nivolumab + Pemetrexed + Carboplatin Q21D (Neoadjuvant NSCLC)	Lung Cancer, Non-small Cell (NSCLC)
Pembrolizumab + Docetaxel + Carboplatin Q21D (Part 1 of 2)	Head and Neck Cancer (Parent)
Topotecan IV D1-5 Q21D (Uterine)	Uterine Cancer (Parent)
Tremelimumab-actl + Durvalumab + Pemetrexed + Carboplatin Q21D	Lung Cancer, Non-small Cell (NSCLC)
Tremelimumab-actl + Durvalumab + Pemetrexed + Cisplatin Q21D	Lung Cancer, Non-small Cell (NSCLC)
Tremelimumab-actl + Durvalumab + Gemcitabine D1,8 + Carboplatin Q21D	Lung Cancer, Non-small Cell (NSCLC)
Tremelimumab-actl + Durvalumab + Gemcitabine D1,8 + Cisplatin Q21D	Lung Cancer, Non-small Cell (NSCLC)
Tremelimumab-actl + Durvalumab + Abraxane D1,8,15 + Carboplatin Q21D	Lung Cancer, Non-small Cell (NSCLC)
Tremelimumab-actl + Durvalumab Q28D Maintenance	Lung Cancer, Non-small Cell (NSCLC)
Tremelimumab-actl + Durvalumab + Pemetrexed Q28D Maintenance	Lung Cancer, Non-small Cell (NSCLC)

Updates

Regimens for the following diagnoses have been updated based on the Collaborative Care Committee voting. Changes include but are not limited to reference update, drug infusion instruction updates, renaming of regimens, premedication template updates and number of cycles.

- All Problems
- Brain Tumor (Parent)
- Breast Cancer
- Cervical Cancer
- Leukemia, Acute Lymphocytic (ALL)
- Leukemia, Chronic Lymphocytic (CLL)
- Lymphoma, Non-Hodgkin (NHL) (Parent)
- Melanoma, Skin
- Multiple Myeloma (MM)
- Polycythemia Vera
- Uterine Cancer (Parent)

Renames

Previous Name	New Name
Temozolomide IV D1-42 + XRT Q42D fb Temozolomide IV D1-5 Q28D (Part 1 of 2: Temozolomide IV + XRT Only)	Temozolomide IV D1-42 + XRT Q42D fb Temozolomide IV D1-5 Q28D (Part 1 of 2)
Temozolomide PO D1-42 + XRT Q42D fb Temozolomide PO D1-5 Q28D (Part 1 of 2: Temozolomide PO + XRT)	Temozolomide PO D1-42 + XRT Q42D fb Temozolomide PO D1-5 Q28D (Part 1 of 2)

Research

Updates

	Updated Reference Information			
		Updated Drug Service Order Information		
			Updated Regimen Instructions	
				Other Changes
USOR 19105	X		X	
USOR 20137		X		
USOR 20223	X		X	
USOR 20418	X			

	Updated Reference Information			
	Updated Drug Service Order Information			
	Updated Regimen Instructions			
	Other Changes			
USOR 21239	X	X	X	<p>Now available: USOR 21239 Arm A Pemetrexed + Carboplatin + Amivantamab (if less than 80 kg) Cycles 1-4 USOR 21239 Arm A Pemetrexed + Carboplatin + Amivantamab (if 80 kg or greater) Cycles 1-4</p> <p>No longer available: USOR 21239 Arm A Lazertinib (PO; Daily) + Pemetrexed + Carboplatin + Amivantamab (if less than 80 kg) Cycles 1-4 USOR 21239 Arm A Lazertinib (PO; Daily) + Pemetrexed + Carboplatin + Amivantamab (if 80 kg or greater) Cycles 1-4</p>
USOR 21309	X	X	X	<p>Now available: USOR 21309 Carboplatin + Upifitamab Rilsodotin Q28D (Cycle 1-6) USOR 21309 Upifitamab Rilsodotin Maintenance Q28D (Cycle 7+)</p> <p>No longer available: USOR 21309 Module A Carboplatin + Upifitamab Rilsodotin Q28D (Cycle 1-6) USOR 21309 Module A Upifitamab Rilsodotin Maintenance Q28D (Cycle 7+)</p>
USOR 21527	X	X	X	
USOR 22018	X	X	X	
USOR 22052	X			
USOR 22074		X	X	
USOR 22147	X	X	X	

Billing & HCPCS Codes

The January 2023 updates include new HCPCS Level II codes to separately identify products approved under the 505(b)(2) New Drug Application (NDA) or the Biologics License Applications (BLA) pathways after October 2003, and *not rated as therapeutically equivalent* to a reference listed product in an existing code. A complete application summary and coding link can be found [here](#).

As of the December content release, all HCPCS Level II are not available from our vendors for updating. We anticipate all codes being fully updated in iKnowMed by Thursday, Jan. 5, 2023.

Updates

Please visit CMS's website for a complete list of January 2023 [HCPCS Quarterly](#) updates.

Medication	HCPCS Codes
Acetaminophen (B Braun), not therapeutically equivalent to J0131	J0134 per 10 mg
Acetaminophen (Fresenius), not therapeutically equivalent to J0131	J0134 per 10 mg
Argatroban (Accord), not therapeutically equivalent to J0883 (for non-esrd use)	J0891 per 1 mg
Argatroban (Auromedics), not therapeutically equivalent to J0883 (for non-esrd use)	J0898 per 1 mg
Amiodarone HCl (Nexterone)	J0823 per 30 mg
Bortezomib, (Dr. Reddy's), not therapeutically equivalent to J9041	J9046 per 0.1 mg
Bortezomib (Fresenius Kabi), not therapeutically equivalent to J9041	J9048 per 0.1 mg
Bortezomib (Hospira), not therapeutically equivalent to J9041	J9049 per 0.1 mg
Calcium gluconate (Wg critical care)	J0611 per 10 mL
Cefazolin sodium (Baxter), not therapeutically equivalent to J0690	J0689 per 500 mg
Cefepime HCL (Baxter), not therapeutically equivalent to Maxipime	J0701 per 500 mg
Cefepime HCL (B Braun), not therapeutically equivalent to Maxipime	J0703 per 500 mg
Chlorprocaine Hydrochloride	J2401 per 1 mg
Chlorprocaine Hydrochloride (Clorotekal)	J2402 per 1 mg
Daptomycin (Hospira), not therapeutically equivalent to J0878	J0877 per 1 mg
Decitabine (Sun Pharma), not therapeutically equivalent to J0894	J0893 per 1 mg
Epinephrine (Belcher), not therapeutically equivalent to J0171	J0173 per 0.1 mg
Fosaprepitant (Teva), not therapeutically equivalent to J1453	J1456 per 1 mg
Fulvestrant (Fresenius Kabi) not therapeutically equivalent to J9395	J9394 per 25 mg
Fulvestrant (Teva) not therapeutically equivalent to J9395	J9393 per 25 mg
Ganciclovir sodium (Excela), not therapeutically equivalent to J1570	J1574 per 500 mg
Glucagon Hydrochloride (Fresenius Kabi), not therapeutically equivalent to J1610	J1611 per 1 mg
Heparin sodium (Pfizer), not therapeutically equivalent to J1644	J1643 per 1000 units
Leuprolide Acetate (Lutrate)	J1954 per 7.5 mg
Linezolid (Hospira), not therapeutically equivalent to J2020	J2021 per 200 mg

Medication	HCPCS Codes
Meropenem (B Braun), not therapeutically equivalent to J2185	J2184 per 100 mg
Micafungin sodium (Par Phar), not therapeutically equivalent to J2248	J2247 per 1 mg
Midazolam Hydrochloride (Wg critical care), not therapeutically equivalent to J2250	J2251 per 1 mg
Morphine Sulfate (Fresenius Kabi), not therapeutically equivalent to J2270	J2272 up to 10 mg
Moxifloxacin (Fresenius Kabi), not therapeutically equivalent to J2280	J2281 per 100 mg
Naloxone Hydrochloride (Zimhi)	J2311 per 1 mg
Pemetrexed IV (Teva) not therapeutically equivalent to J9305	J9314 10 mg
Risankizumab-rzaa	J2327 per 1 mg
Tecovirimat (Tpoxx)	90622 per <ul style="list-style-type: none"> • 0.3 mL • 200 mg • 300 mg
Tigecycline (Accord), not therapeutically equivalent to J3243	J3244 per 1 mg
Trace Elements Zn-Cu-Mn-Se IV 3 mg-0.3 mg-55 mcg-60 mcg/mL	J3490 per 1 mL
Vancomycin HCL (Mylan), not therapeutically equivalent to J3370	J3371 per 500 mg
Vancomycin HCL (Xellia), not therapeutically equivalent to J3370	J3372 per 500 mg
Vutrisiran	J0225 per 1 mg