

Reimbursement Changes/Quarterly Code Updates 2026

This schedule is not a guaranty of payment. Variances in reimbursement may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider contract terms and conditions, applicable medical policy and benefits, limitations and exclusions. Maximum allowable and components of rates such as modifiers or conversion factors, and applicable rules such as bundling, may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. Values reflect the component of a code related to the place of treatment. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - HCSC Confidential and Proprietary.

2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2018, 2020 & 2025 Hospital OP Base Compensation Schedules
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APC Grouped Base Compensation Schedule Update			
Procedure Code	Contract Base Rate	Effective Date	End Date
C8007	\$31,526.06	1/1/2026	
C8008	\$11,384.04	1/1/2026	
C8009	\$3,490.14	1/1/2026	
C8011	\$31,526.06	1/1/2026	
C8012	\$11,384.04	1/1/2026	
C8013	\$3,490.14	1/1/2026	
C8010	\$12,500.50	4/1/2026	

Cardiac Cath/PTCA Base Compensation Schedule Update			
Procedure Code	Contract Base Rate	Effective Date	End Date
C8010	\$12,500.50	4/1/2026	

Low Tech Radiology Base Compensation Schedule Update			
Procedure Code	Contract Base Rate	Effective Date	End Date
G0680	\$15.50	4/1/2026	

Lab/Pathology Base Compensation Schedule Update			
Procedure Code	Contract Base Rate	Effective Date	End Date
0614U	\$2,842.53	4/1/2026	
0615U	\$17.21	4/1/2026	
0616U	\$53.60	4/1/2026	
0617U	\$53.60	4/1/2026	
0618U	\$53.60	4/1/2026	
0619U	\$53.60	4/1/2026	
0620U	\$53.60	4/1/2026	
0621U	\$53.60	4/1/2026	
0622U	\$53.60	4/1/2026	
0623U	\$53.60	4/1/2026	
0624U	\$53.60	4/1/2026	
0625U	\$53.60	4/1/2026	
0626U	\$53.60	4/1/2026	
0627U	\$53.60	4/1/2026	
0628U	\$950.00	4/1/2026	
0629U	\$42.84	4/1/2026	
0630U	\$3,159.42	4/1/2026	

2026 Reimbursement Changes/Updates

Other Base Compensation Schedule Update			
Procedure Code	Contract Base Rate	Effective Date	End Date
G0681	\$1,829.23	4/1/2026	
G0682	\$26.09	4/1/2026	
G0683	\$3,660.97	4/1/2026	
G0684	\$88.11	4/1/2026	
M0233	\$450.50	4/1/2026	
M0234	\$450.50	4/1/2026	

2015, 2016, 2018, 2020 & 2025 Hospital OP Base Compensation Schedules			
Durable Medical Equipment Base Compensation Schedule Update			
Procedure Code	Contract Base Rate	Effective Date	End Date
A2040	\$127.14	4/1/2026	
A2041	\$127.14	4/1/2026	
A2042	\$127.14	4/1/2026	
A2043	\$127.14	4/1/2026	
A2044	\$440.61	4/1/2026	
A2045	\$127.14	4/1/2026	
A4318	\$9.08	4/1/2026	
A6548	\$20.86	4/1/2026	
A8005	\$1,922.29	4/1/2026	
A8006	\$1,922.29	4/1/2026	
C1743	\$0.00	4/1/2026	
Q4418	\$127.14	4/1/2026	
Q4419	\$127.14	4/1/2026	
Q4421	\$127.14	4/1/2026	
Q4422	\$127.14	4/1/2026	
Q4423	\$127.14	4/1/2026	
Q4424	\$127.14	4/1/2026	
Q4425	\$127.14	4/1/2026	
Q4426	\$127.14	4/1/2026	
Q4427	\$127.14	4/1/2026	
Q4428	\$127.14	4/1/2026	
Q4429	\$127.14	4/1/2026	
Q4435	\$127.14	4/1/2026	
Q4436	\$127.14	4/1/2026	
Q4437	\$127.14	4/1/2026	
Q4438	\$127.14	4/1/2026	
Q4439	\$127.14	4/1/2026	
Q4440	\$127.14	4/1/2026	

2026 Reimbursement Changes/Updates

Drug (CPT/HCPCS) Base Compensation Schedule Update			
Procedure Code	Contract Base Rate	Effective Date	End Date
C9309	Requires Review	4/1/2026	
C9818	\$0.33	4/1/2026	
J0463	\$0.01	4/1/2026	
J1098	\$0.69	4/1/2026	
J1164	\$0.20	4/1/2026	
J1553	\$27.08	4/1/2026	
J3404	\$115,920.00	4/1/2026	
J8502	\$2.17	4/1/2026	
J9003	\$102.48	4/1/2026	
J9183	\$81,362.40	4/1/2026	
J9277	\$35.77	4/1/2026	
J9278	\$5.84	4/1/2026	
J9601	\$110.77	4/1/2026	
Q0238	\$6.22	4/1/2026	
Q5161	\$25.20	4/1/2026	
Q5162	\$17.63	4/1/2026	